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THE *Journal*  
OF THE NORTH CAROLINA DENTAL SOCIETY

SEPTEMBER, 1960



VOL. 44, NO. 1

*District Program Issue*

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# THE JOURNAL

## of

### The North Carolina Dental Society

(A Constituent of the American Dental Association)

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# The Journal of the North Carolina Dental Society



sincerely  
dedicates  
this issue

to —

D. LeROY PRIDGEN  
D.D.S., F.A.C.D.  
Fayetteville,  
North Carolina


Born in Godwin, North Carolina, April 28, 1895 . . . Was graduated from Atlanta-Southern Dental College in 1918 . . . President of the North Carolina Dental Society 1936-1937 . . . Secretary-Treasurer of the North Carolina Dental Society 1932-1936 . . . First President of the Fourth District Dental Society 1920-1921 . . . A charter member and Past President of the Fayetteville Kiwanis Club . . . A Past Master of Phoenix Lodge No. 8 A. F. & A. M. 1925-1926 . . . A member of the North Carolina State Board of Dental Examiners 1942-1951 . . . A member of the Cumberland County Board of Health . . . An elder in the First Presbyterian Church of Fayetteville . . . Above all, a man who has selflessly given of his best to his family, his community, his church and the profession he loves so much.





DR. BUTLER

# The President's Page



Since there is no plan available for training prosthetic dental laboratory technicians, the North Carolina Dental Society for some time has been vitally interested in establishing a training program for these men.

In May, 1960, the N.C.D.S. House of Delegates approved a resolution endorsing the establishment of a program to train prosthetic dental technicians.

Plans have gone forward. The program will be established at the Industrial Education Center at Durham and administered by the Durham City schools in co-operation with the State Department of Instruction. Adequate assistance and supervision from the UNC School of Dentistry is assured, and Durham was selected because of its proximity to the Dental School at Chapel Hill. The curriculum and standards will meet the exacting requirements of the Council on Education of the American Dental Association and the National Association of Dental Laboratories. It is anticipated that the program will be put into operation by September, 1961 and this will constitute the first non-commercial dental technician school in the entire South.

Applicants for the school will be carefully and scientifically screened to make certain that only individuals with potential talent for the exacting work of a dental laboratory technician will be accepted. The two year course will be given to high school graduates and the class size will be from 15-20 per year. The entire program will be supported by federal, state, and local funds. There will be no tuition charge, but each student will bear the cost of books and laboratory supplies.

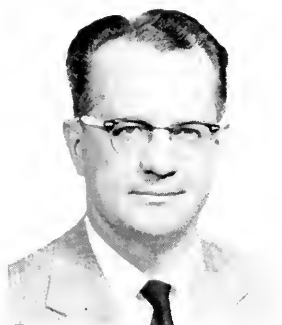
We feel that such an educational program will be a forward step in elevating the standard of dentistry in this state and thereby directly benefit the public at large.

Many of our dentists throughout the entire state have devoted long hours and untiring efforts in helping to formulate plans for this magnanimous endeavor. We are greatly appreciative of work that has already been accomplished, and in the future we earnestly solicit the enthusiastic co-operation from each dental society member.

I look forward to seeing each of you at the district meetings.

LUTHER H. BUTLER, D.D.S.

GREENSBORO  
JULY 12, 1960



DR. ROSS

## *The President-Elect Speaks*

### WHO WILL HELP?

Any member of the North Carolina Dental Society wishing to be considered as a committee member, or having an interest in some area of the workings of the Society, is hereby invited to make it known. I, or any officer of the Society, will welcome hearing from you. Remember that only one member is released from the standing committees each year, so there will be limited opportunities in your District for these positions, but evidence of your interest will be passed on to future administrations, and this information may prove helpful for further consideration.

I would also like to speak for the Presidents-Elect of the District Societies, knowing that they would be happy to hear from you of your willingness to serve on the District committees. We have all seen unsatisfactory committee's inaction, and some of us have been fortunate enough to see, feel, and be a part of a group of our Society united in action. Please let us hear from you.

Congratulations to those recently licensed to practice dentistry in North Carolina! We think it the finest place to practice in the world, and ask you to work to improve it so it will always be. We look forward to meeting you at the District meetings, and getting to know you. Organized dentistry has so much to offer these days that we hate to see anyone decline the opportunity to join, partake, and share with us the joys and tribulations, the pleasures and duties, the benefits as well as the costs and responsibilities.

Members! Encourage that recent graduate, or newcomer, or stray to get his application properly submitted. Welcome and help him! You will gain a colleague and lose a competitor. He will always remember with respect and regard the man who helped him when he needed it!

Don't you?

NORMAN F. ROSS, D.D.S.

DURHAM  
JULY 11, 1960



DR. TOWLER



## *From the Secretary's Desk*

It was a distinct honor to be re-elected Secretary-Treasurer of our great Society for the ensuing year, and I want to express my appreciation for your confidence in me.

I am looking forward eagerly to attending the District Meetings this fall. It was a genuine pleasure and privilege to be with you all last fall. The attendance and fellowship at all the meetings were excellent. Each District presented a highly educational scientific program along with clean, wholesome entertainment at the banquet for which they can be justly proud. I am sure that the meetings this year will be of the same fine caliber.

Especially am I looking forward to meeting the new members who will join with us in organized dentistry at these meetings, and to welcome them into the North Carolina Dental Society.

I know you share with me justifiable pride in the all-time record attendance at our 104th Annual Session in Pinehurst last May. Increased interest in our annual meetings is a good indication that the members are seriously concerned with the affairs of the Society and in making the very most of every opportunity to keep abreast of new developments in the dental profession.

Committee appointments have been made by President Butler and you can be assured that this administration is organized for a fruitful year. With your support, I am confident that many things can be accomplished during the coming months.

It is encouraging to note a statement by the A.D.A. Council on Dental Health that modern X-ray equipment and techniques for routine dental diagnostic purposes are not harmful.

Let me also call your attention to an announcement by the National Office of Vital Statistics that hepatitis is on the increase. So far this year, 15,738 cases have been reported, as against 10,116 in the first 20 weeks of 1959. I mention this so that we all can give it proper consideration for ourselves as well as our patients.

S. BRYON TOWLER, D.D.S.

RALEIGH  
JULY 27, 1960

# **Editorials**

## PERIODONTIA

### TOMORROW

This issue of the JOURNAL deals for the most part with one very important aspect of dentistry, and that is periodontia. For the past several years, emphasis has been placed upon high speed in operative dentistry. This has been a good thing for dentistry, because if any aspect of dentistry needed to have its morale boosted, it was in the operative field. It is the opinion of many educated observers, however, that now is the time to concentrate upon periodontia.

A firm, solid, and lasting foundation upon which to build is a prerequisite for your home, your clinic, or your multi-storied office building. The same holds true for the teeth upon which you work, no matter if you are an orthodontist, endodontist, a crown and bridge specialist, or a filling specialist. No matter how beautiful that which shows, with a crumbling foundation the end result will be rubble.

Many factors are pushing the importance of periodontia to the front today. At the turn of the century the most important aspect of a dental practice was extractions and plate work. Thank goodness this is

not true today. Emphasis is now placed upon saving teeth. Better education, better techniques, better equipment, better living standards, and a higher level of "patient education" is contributing to saving teeth rather than extracting them. While more and more teeth are being saved longer, the life span of the average United States citizen is increasing. With the increase in life span, there comes a proportionate increase of potential periodontal trouble. It is not only the middle-age group and the aged, for more and more children and early teenagers are showing evidence of moderate to heavy calculus formation and periodontal trouble.

This all adds up to one thing. Unless we dentists react positively to this situation, the overall dental health of our nation is not going to improve. It is folly to save a tooth from one disease and then lose it to another. First of all, it is imperative that every general practitioner recognize all symptoms and etiological factors relating to periodontoclasia. Second, treating the patient in accordance with all our present day knowledge, ability, and capability is

mandatory. Third, being cognizant of our limitations, and being honest with ourselves and our patient, we should enthusiastically refer every patient that we cannot treat properly to a qualified periodontist. When the periodontist accepts this referred patient, he accepts certain fundamental obligations also. Of utmost importance, he must be worthy to have patients referred to him. In addition, the results produced, the manner in which the patient is handled, and the attitude of the specialist in returning the patient to the referring general practitioner for routine X-rays and check-ups is most important.

Dentistry is now a static profession. As of today, dental caries is the most universal disease of man. Perhaps within the lifetime of some living dentists, research may find the answer to this disease. Research will undoubtedly enable us to eliminate many of the systemic causes of periodontal disease in the future also. Research will never, however, remove the mechanical causes.

The handwriting is on the wall. Periodontal disease is going to play an ever-increasing role in our practice of dentistry. Cognizance of such today will mean better dental health tomorrow.

CCD

## AN IMPASSE

The two immediate past presidents each appeared before their respective House of Delegates and requested a dues increase for our Society. For two consecutive years they have been turned down. For one reason or another these two Past Presidents and the House of Delegates have failed to obtain unanimity and fusion of purpose.

Why has the House of Delegates turned down a dues increase? Is it because they cannot afford a ten dollar increase? This can hardly be the reason, for a five dollar increase

was turned down by even a larger margin than was the ten.

Does the House of Delegates feel complacent regarding the status of our Society? No! There is not a single member in our House of Delegates who would even think in the affirmative regarding the above-mentioned question.

Does the House of Delegates *really* want a financial sheet of proposed expenditures, such as General Electric might submit to its Board of Directors, to validate a dues increase? This may sound appealing initially, but after thinking about it

for awhile, this is not good logic for several reasons. The biggest single objection to this idea is the matter of timing. The President does not appear before his House of Delegates until the end of his term of office, and then under no circumstances whatsoever should he ask for any money that would completely commit the following President with his own projects, ideas, and policy. Our Dental Society is operated on a democratic basis, and there is no room for any dictatorial ideas of any kind. It is a different story if the general membership or House of Delegates should vote on specific projects for the Society to undertake and accomplish. This is done in many instances and is good, but, as a rule, it is up to the Executive Branch of any democratic form of government to provide leadership and policy.

What, then, are the reasons for the delegates' actions? The answer is probably quite simple. They want a reason. They want a concise, clear-cut reason for the need that they are able to understand, and if necessary, explain to their members back home. If we are to have a dues increase, each individual member of our Society is entitled to a dollar return in actual benefits to organized dentistry, as is the populace of our state, for each dollar expended. The North Carolina Dental Society needs more money for the same reason that a utilities company needs more money at times. We need it for expansion of services. Until every citizen in North Carolina is educated as to the importance of good dental health, as long as many of our state institutions offer inadequate dental care to their patients, as long as we have

cities without fluoridation in their water supply, as long as practicing dentists and their auxiliary personnel are able to better the quality of their work and become more efficient by being offered lectures, seminars, and scientific sessions, and until there is no longer any need for dental care programs, dental research, and better public relations, we cannot cease to expand our services.

With all the needs listed above, and many more, crying to us for attention, we have no room for stalling, misunderstanding, bickering, or what have you. Perhaps a compromise should be reached between the presidents and the House of Delegates regarding the amount of dues increase. If a five dollar increase were put into effect first, our leaders could, perhaps, develop a more orderly expansion program in the needed fields and thereby relieve them of the responsibility of feeling that they had to participate in a "crash program." At such future time, then, when an administration feels that the progress of our Society is again curtailed by lack of funds, another dues increase should be asked for and granted.

The impasse that has existed between the two immediate past presidents and the House of Delegates must be dissolved, and it can only be accomplished by positive, progressive and affirmative action by the House of Delegates. The item on increase of dues should be on the agenda for the very next session of our House of Delegates. The forces not friendly to dentistry, such as those that would socialize us, and the denturists are not standing still, and neither should we.

CCD

## BRING YOUR SCRAP AMALGAM TO YOUR DISTRICT MEETING

### An Open Letter to the Members of the North Carolina Dental Society

July 12, 1960

Dear Members:

For a number of years, the chief source of revenue for the Relief Fund of the North Carolina Dental Society has been the Annual Scrap Amalgam Drive sponsored by the North Carolina Dental Auxiliary. Since 1953 the Auxiliary has raised over \$11,000 for the Relief Fund through its annual drives.

The Auxiliary has taken on this project as their main endeavor again this year. Let me urge each of you to save every bit of scrap amalgam for the benefit of fellow dentists in your own state who may need your help.

Mrs. W. W. Rankin of Raleigh is State Chairman this year and she has announced that not one, but two collections will be made this year. The first will be at the District Meetings this fall when members of the Auxiliary will be on hand at the registration desks to receive your scrap amalgam. The second collection will be made the week of March 13-18, 1961, when Auxiliary members and representatives of dental supply houses will personally call at your office for the pick-up.

Save all your scrap amalgam for Dental Relief!

Bring what you have to your District Meeting in the fall and start saving again for the drive next Spring.

Sincerely yours,

s/ LUTHER H. BUTLER

Luther H. Butler, D.D.S., President  
North Carolina Dental Society



## Diagnosis

The importance of a correct diagnosis in the treatment of periodontal diseases cannot be overemphasized. A good physician or dentist searches all avenues at his disposal for information pertinent to his diagnosis before treatment or surgery.

A basis requirement in the management of periodontal diseases is to be able to predict with some degree of accuracy the success of the treatment procedures. This requirement cannot be met unless the correct diagnosis has been made before treatment planning and therapy.

---

### ABOUT THE AUTHOR

**Hubert Royster Chamblee, D.D.S., F.A.C.D.,** attended Wake Forest College and received his dental degree from the Medical College of Virginia in 1925. He practiced general dentistry in Raleigh, North Carolina, until 1952. Since that time, he has limited his practice to periodontics. Dr. Chamblee is part time instructor in the Department of Periodontia and Oral Pathology in the School of Dentistry at the University of North Carolina.

It is an accepted fact that a correct diagnosis cannot always be made in the field of periodontics, since there can be many complex systemic influences contributing to periodontal disease syndromes, however, the effort to find the causes of periodontal diseases by a detailed examination and case history of all relating factors, both local and systemic, will aid in the management of all cases in need of treatment.

### Examination and Case History

It has been said that "the good clinician is he who will spend much time in an examination."

Case histories should include: (1) names, addresses, occupations, oral complaints; (2) condition of gingivae, depth of sulci, faces, lips, cheeks, tongues, hard and soft palates, missing, loose and sore teeth, caries, poor contact points, malocclusions and traumas; (3) atmospheric irritations, hyperplasias, pus, calculi, odor of breaths, ulcers, neoplasmas, bruxisms, sizes of tongues, habits of tongues, cysts, abscesses, cheek and lip bitings; (4)



# in the Field of Periodontics

H. ROYSTER CHAMBLEE  
D.D.S., F.A.C.D.

general health of patients, tensions, diets, habits, neuralgias, allergies, self-medications, heart and blood pressures, diabetes mellitus, hemophilias, lungs, rheumatic fevers, pregnancies, menopausal syndromes, hereditaries, drugs, and blood dyscrasias.

## **Radiograph Examination**

The X-ray findings help to discover periodontal diseases in the incipient stages. It confirms clinical findings in the periodontium, reveals conditions of the alveolar bone, conditions of roots, abscesses, cysts, periodontal pockets, lamina dura, alveolar atrophys.

## **Models and Photographs**

Models made and occluded and photographs are important as adjuncts in the diagnosing of periodontal diseases.

The study models are an aid in locating prematurities in traumatic occlusion cases and for the planning of splints. Make photographs for future references and demonstrations.

## **Pertinent Factors to a Diagnosis of Periodontal Diseases**

There are two main types of periodontal diseases: (1) local, which produces inflammation, and (2) systemic, which causes degeneration of the gingivae. Some of the local factors which cause inflammation are: calculi, food packs, faulty dental restorations, tooth picks, and mouth breathers. Calculus probably causes more local irritations and produces eventually more destructions to the periodontium than any other single factor. The local irritations produce inflammation, and cause a breaking down of the epithelial lining of the gingiva and gingival sulci, permitting the invasion of bacteria.

Much controversy has ensued for many years regarding the influence of systemic diseases on the periodontium. While many local injuries have been attributed to systemic diseases, few or no types of periodontal diseases have been found to be related to a definite systemic disease. Systemic disturbances which lower the general resistance threshold lower the resistance of the

periodontium, with the other tissues of the body, causing local injuries to be more damaging to the periodontium. Frequently, gingival tissue will tolerate some irritation, such as calculus, with little or no inflammation until pregnancy ensues with its related hormonal changes. Frequently, masses of hyperplasia of the gingiva results from this syndrome. Diabetes mellitus is another entity and it frequently manifests itself by contributing to swelling and hemorrhage of the gingiva, if there are irritants on the root surfaces of the tooth.

Periodontosis, a disease of the periodontium, is thought to be a manifestation of systemic disease and is explained on this basis by many authorities. Bunting explains the systemic diseases that increase the inflammation and damage caused by local irritants in this manner: "Disturbances of the general health and nutrition of the body frequently produce marked changes in the tone and vital resistance of the gingival and periodontal tissue and renders them more susceptible to injury from traumatic stresses and bacteria invasion."

The systemic syndromes most of-

ten accused of contributing to the disease of the periodontium are: hormonal disturbances, nutritional deficiencies, blood dyscrasia and drug poisoning. A good internist can be of great assistance in the quest of a correct diagnosis when systemic diseases are suspected of being contributing factors in periodontal diseases.

### Conclusion

There should always be an effort to diagnose periodontal diseases before treatment planning and therapy are instituted, since the success of the treatment is based on this act.

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RALEIGH, NORTH CAROLINA

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# Acute Periodontal Abscess

## Diagnosis and Treatment

MOULTRIE H. TRULUCK, D.D.S.

Too many teeth are needlessly extracted that could be saved and utilized for many years if a proper diagnosis and careful treatment were carried out. Many dentists do not realize that an acute periodontal abscess is the acute manifestation of Periodontitis (periodontal disease), and that it is a relatively simple procedure to eliminate the pain, swelling, and infection that the patient is enduring.

### Diagnosis and Symptoms

An abscess will occur when an infected periodontal pocket is partially or completely occluded and pus cannot escape. Pockets of varying depths are present and the overlying inflamed alveolar mucosa is glistening and cyanotic, with the gingival tissue being swollen and painful. A pre-existing periodontitis is part of the syndrome. Severe pain usually accompanies the formation of the acutely forming periodontal

abscess because of distention and rapid destruction of both soft and bony tissues. Occasionally the pain is slight, especially during early stages when internal pressure is minimal, and bleeding is spontaneous or easily induced. The abscesses vary in size from 3-15 mm., or more, and are usually located lateral to the roots of the teeth, or in bifurcated and trifurcated areas of multi-rooted teeth.

Usually a single tooth is involved, although multiple abscesses may occur. Affected tissues will appear red or cyanotic. If the deeper connective tissue structures are more profoundly involved than the outer gingiva, there may then be a firm swelling with little color change. The acute change may be brought about by a superimposed irritating factor, such as bacteria, food impaction, or other local traumatic agencies. Subgingival calcareous deposits will be found on the root surfaces. Because

of the extension to the bone and periodontal membrane, the affected tooth is usually mobile. A fever may accompany due to the dissemination of the infection.

Often purulent exudate can be expressed from the periodontal pocket in rather large amounts about the involved tooth or from the abscess itself. Internal pressure increases with the accumulation of suppurative material and at times the gingival tissue may rupture and a fistula forms. This rupture relases the pressure and lessens the pain, and the abscess lapses into a quiescent state. The fistula itself may sometimes become clogged with suppurative material resulting in a lack of drainage, and pressure inside the abscess may increase again. If the pressure inside the abscess becomes great enough, the purulent material will again burst through the fistula and drain. Arrest of the severe symptoms can occur quickly through encapsulation, but complete healing will result only through proper treatment.

### **Treatment**

1. Radiographs should always be made of the affected teeth at the time of the examination. This is essential even though radiographs are available which may have been made a few weeks previously. Pronounced rapid destruction of bone often occurs in a few days during the acute stage. The extent of tissue destruction can be observed in the radiographs and this will assist in determining the prognosis of the affected tooth.

2. Any fluctuating area should be punctured with a sharp scalpel, and a drain should be inserted to keep

the orifice open. A local anesthetic should be employed to prevent undue pain. With a periodontal curette, go into the periodontal pocket and remove all food debris and gross sub-gingival deposits from the root surface, even in the presence of acute symptoms. This phase of therapy markedly reduces the pain, swelling, and suppuration. Root curettage will also aid in aborting a developing abscess where the tissues are painful and swollen prior to the stage of frank accumulation of pus. Profuse hemorrhage from the pocket during curettage is desirable to reduce the congestion of blood in the tissues.

3. If it is found that the full extent of the root surface in the pocket area cannot be curetted in a developing abscess, gingival resection is indicated to prevent the enclosure of bacteria and pus in the pocket. In a chronic case, gingival resection may be done without prior root curettage. This is recommended in cases where treatment of the root surface would not be adequate to eliminate the abscess.



**DR. TRULUCK**

Antibiotics are indicated only if good drainage is not established. Do not employ the use of antibiotics alone without local treatment as outlined previously. Equal parts of iodine, olive oil, and quiacol mixed serve as a good medication to saturate the gauze drain that is placed in the incised abscess.

4. Where occlusal trauma is present, preliminary grinding of the teeth should be done to reduce the stresses to the periodontal tissues. An anesthetic should be used and a sedation prescribed.

5. The patient should be instructed in good oral hygiene and advised to use a comfortably hot solution of salt and sodium bicarbonate as a vigorous mouth rinse every two hours.

The patient should be free of all acute symptoms within twenty-four hours or less. After five to seven days, the root curettage can be continued and completed in the routine manner.

### **Conclusion**

Many thousands of teeth are needlessly extracted every month that could be saved and utilized for years, if the dentists in general practice would make a careful diagnosis and institute the proper treatment, which is a relatively simple procedure. Every dentist should make a sincere effort to treat those teeth that could be salvaged.

675 BILTMORE AVENUE  
ASHEVILLE, NORTH CAROLINA

# **Treatment of Pathologically Migrated Teeth**

One of the problems with which periodontists are frequently faced is the migration of teeth that are periodontally diseased creating diastemas, protrusions and all the various and disorderly positions into which these loose and weakened teeth can move. Getting rid of the disease and returning the gingival tissues back to normal and healthy condition are not enough. Esthetics is still a factor with most patients and if this cannot be accomplished along with the treatment, many would prefer to have these teeth extracted and replaced with artificial ones. Unless periodontally diseased migrated teeth can be moved back to their original position and retained there in a healthy condition, then those interested in periodontia are missing a real opportunity to render a service that is very much appreciated by the patient and also very satisfying

to the operator. I will attempt in this article to describe a method of how this problem can be handled.

## **Cause of Tooth Movement**

First, we must understand why and how teeth move because of periodontal disease. Most of the movement occurs as a result of the building up of inflammatory tissue or granulation tissue associated with the periodontal pocket. This constant pressure with the destruction of the transverse and horizontal fibers on the pocket side of the tooth causes it to move in a direction away from the disease. Figure (1) illustrates by roentgenogram, Figure (2) by photograph how this happens. Notice that tooth has moved labially away from bone destruction and pocket formation on lingual. I might add that sometimes just the

GEORGE F. KIRKLAND, JR., D.D.S.



removal of the inflammatory tissue and elimination of periodontal pocket are enough to allow migrated teeth to resume their original position. However, most of these cases require more than this to accomplish desired results.

### **Treatment**

The first stage of treatment necessitates elimination of the periodontal pocket and returning gingival tissue to a normal healthy condition. When dealing with the anterior teeth, it is always a good idea to preserve as much of the labial gingivae as possible for esthetic reasons. The surgical technique of choice is the so-called Kirkland Flap operation. With this operation, for those not familiar, the unhealthy tissue is removed and the root surfaces cur-

retted from the lingual aspect. The labial gingiva is retracted but not excised. There are other surgical approaches to which one could resort to attain the same results, and under certain conditions may be better than flap operation. However, the operator, regardless of what technique is used, must keep in mind the preservation of the labial gingival tissue. Only after the pocket is eradicated and the area returned to a normal healthy condition are we ready for any movement of migrated teeth. This point cannot be over-stressed. Any movement of periodontal diseased teeth, without treatment before, will result in failure.

### **Moving Migrated Teeth**

After eliminating pocket and returning gingiva to a state of health,



Figure 1

it is now possible to begin movement of migrated teeth. This is accomplished with the use of grassline silk and stainless steel ligature wire. In the cases where only one tooth needs to be moved, and this is usually the case, utilize two teeth on either side for leverage. Anchor grassline silk by tying a loop around each of the two teeth on one side, over-lapping tooth out of position with both strands, and tying loop around each of the two teeth on other side. See Figure (3) for illustration. It is sometimes better to wire together two teeth on either side of migrated tooth particularly if these teeth are not too



Figure 2



Figure 4



Figure 3

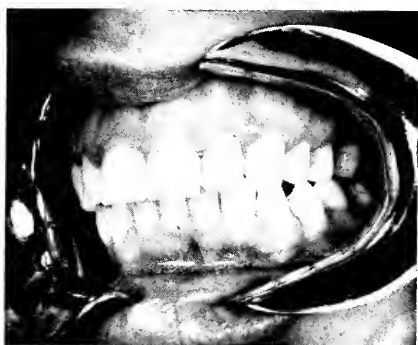


Figure 5



strong. Keeping in mind that the shrinking qualities of the grassline silk is what causes the movement, one can move a tooth or teeth any desired direction as long as one uses enough teeth for leverage against tooth or teeth to be moved.

The usual time necessary to complete this procedure for average case is two or three weeks.

After tooth has been moved to desired position it must be splinted there for at least six months. This is done with stainless steel ligature wire. Wire as many teeth as you might think necessary for stability, using a double strand around entire group of teeth to be splinted, with single connecting strand in interproximal spaces, copying technique commonly used for wiring fractured jaws. Wires are twisted until splint is firmly secure and cut ends pushed in between teeth. See Figure (4) for illustration.

Figure (5) is photograph of same area after one year. Wires have been removed six months.

There are occasions, however, where these migrated teeth will tend to move again when splints are re-

moved. When this happens fixed splinting is the only answer. This can be accomplished with pinlays which allows no gold to be seen from the labial. More recently we have been relying on a dove tail inlay on lingual, cast in one piece, with dove tail on each adjacent tooth where space has been closed. These have worked out very satisfactorily, can be carved up directly and cemented, all in one day.

### Summary

(1) Diastemas and protrusions caused by periodontal pathology can be treated and corrected.

(2) This can be done with proper use of grassline silk and ligature wire for movement and splinting.

(3) Temporary splinting is necessary to retain teeth in position. This is accomplished with stainless steel ligature wire.

(4) Fixed splinting can be resorted to if temporary splinting fails.

913 LAMMOND AVENUE  
DURHAM, NORTH CAROLINA

# How Many Roentgens. . .?

Patients ask the dentist many questions. They are interested in materials, techniques, ethics, practice management, fees, and the weather. Most of the popular jokes about dentist-patient conversation have the dentist doing all the talking. Meanwhile, the patient manages a few assorted grunts to indicate answers to current remarks. With such being more the case than not, it's a wonder that so many questions get asked. Still, patients do ask a lot of questions.

One question that has been in vogue recently is "How many roentgens am I getting from these X-rays?" Fortunately the question does not always take this form. As stated above, the question demands an exact numerical quantity for an answer. More often the question is posed in a general form with safety

as its central theme. In these cases, a general answer will usually suffice. It is proposed that the question has no exact answer. It is also suggested that this article may be of some help to dentists who attempt to provide exact answers.

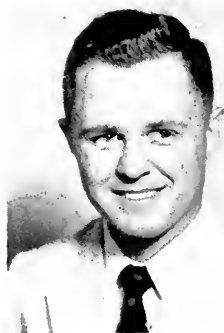
## What Is a Roentgen?

The accepted definition states that a roentgen shall be that quantity of x-or gamma radiation such that the associated corpuscular emission per 0.001293 grams of air produces in air, ions carrying one electrostatic unit of quantity of electricity of either sign.

The immediate reaction to this definition is the rather obvious conclusion that it was written by and for those trained in the physical sciences rather than dentistry. This is only natural since the production of X-rays is a physical phenomenon. It may be redundant, but it is sug-

\* Assistant Professor, Oral Diagnosis and Treatment Planning, UNC School of Dentistry.

\*CLIFTON C. CRANDELL, D.D.S.



gested that perhaps it would be best to leave such definitions in the hands of the physicists, or more specifically, the radiological physicists.

The trend of the whole problem is seen when it is realized that the radiological physicist is often not held in the same regard as the theoretical physicist. Further, not many dentists can be considered to be experts in dental radiation physics. The answer to the question posed in this article possibly lies in a no-man's land between the physical and the biological sciences, or possibly in a remote corner of both.

To reduce the definition to simpler terms, consider first that 0.001293 grams of air represents one cubic centimeter of air at standard conditions of temperature and pressure (zero degrees centigrade and 760 mm. mercury). The first difficulty in answering the question of how many roentgens is immedi-

ately evident; standard conditions do not exist in dental offices. Adjustments and corrections are necessary to compensate for variations in temperature and pressure.

Next, consider that the definition applies to both x-radiation and gamma radiation. The principal difference in these two is their source. Gamma radiation is that which emanates from the nuclei of radioactive substances, while x-radiation is that which is produced by a machine. It is well known that x-radiation will stop when the machine is turned off, while gamma radiation cannot be turned off, on, or speeded up, or slowed down, or altered in any way. The implication is that in measuring x-radiation, one cannot be sure that some gamma radiation that happens to be in the environment, emanating from the soil, the atmosphere, or from outer space, is not also included.

The associated corpuscular emission in the definition implies that the production of X-rays involves the emission of corpuscular bundles of energy. This does not rule out any wave motion. The phenomenon of X-rays has characteristics common to both theories.

The electrostatic unit is the amount of electrical charge which will repel an exactly similar amount of like sign with a force of one dyne when the two are placed one centimeter apart in a vacuum. It is a unit in the centimeter-gram-second system of units and is sometimes called the stat-coulomb. It may be easier to compare this unit of energy with the effort expended by a mosquito doing a push-up.

The rest of the definition specifies the condition that the production of ions occurs in air.

If the patient is able to understand the definition of the roentgen, the dentist probably should sit down and listen, but the dentist might choose to continue talking. If so, the following paragraphs might be recited.

It is seen then that the roentgen is a rather unwieldy unit. For one thing it specifies a measure of ionization, which is merely an effect of the radiation. It is like measuring the speed of a bullet by the number of people it kills. Secondly, it states that this occurs in a one cubic centimeter piece of air that is surrounded by some more air. It is desirable that the piece of air be confined, but if a container is used, a filtering action occurs for which corrections will have to be made. In addition, the ions mentioned above may be produced by photons of X-rays (primary ionization) or by the collision of primary ions with matter (secondary ionization). Secondary ionization

can occur at quite a distance away, depending on the energy involved, which introduces the problem of estimating how much of the total ionization occurred in the one cc. piece of air.

It is obvious that the patient who asks the question is made of tissue, but the roentgen is a unit depending on ionization occurring in air. This might be compared to the motorist who wishes to know how far he must drive to get to an island that can be reached only by boat. You can't get there from here!

Attempts to avoid this confusion have led to increased tendency to use other terms where radiation to tissues is concerned. The rad (unit of absorbed dose), the rep (roentgen - equivalent - physical), the rem (roentgen - equivalent - man), and the RBE (Relative Biological Effectiveness) are terms which must be mastered before pursuing tissue dosage. This would be going too far afield. It should be sufficient to recognize that more knowledge about radiation and its measurement presents further difficulties of greater magnitude and quantity.

### **Extrinsic Factors**

Many factors which are extrinsic to the definition of a roentgen also contribute to the difficulty of answering the question of "How many roentgens . . .?" These are beyond the scope of this paper but should be mentioned.

Since the advent of the 90 Kvp machine, all dental radiation is no longer of the Bremsstrahlung (sudden stoppage of electrons) type of continuous portion of the spectrum. At 69.2 Kvp, tungsten targets give off characteristic or fluorescent ra-

diation in addition to the continuous, resulting from dislodgement of electrons from K shells and these vacancies being occupied by electrons from L shells.

There may be filters and diaphragms in the X-ray machine which should be considered. Voltage drops, (inside and outside of the machine), inaccuracy of timers, inconsistent absorption of X-rays, distance from X-ray machine to patient, scattered and secondary radiation, anatomic variations of patients; and humidity are other factors that enter into the problem.

### Discussion

Admittedly, the foregoing information is not likely to come up in a routine conversation between dentist and patient. It is presented as facetious, even humorous, satire. But there is a bitter truth to be seen also. The measurement of dental radiation is not easy, exact, or well-understood. There are many variables to be considered, few of which can be controlled without elaborate preparations and special equipment.

It is suggested that an appropriate answer to the question of how much radiation a patient receives in the dental office should be aimed at allaying fears without citing data. If the patient has the confidence he should have in the dentist, perhaps there would be no question. Unfortunately, this type of rapport is not always established. When the question of radiation hazards is raised, the dentist might say, "To the best of my knowledge and my reading of the literature, I do not think the danger of the radiation is as great as a possible error in diagnosis that I

might make if I don't make X-rays. Furthermore, I have followed all recommended methods of reducing radiation hazards that are compatible with making an adequate diagnosis."

### Summary

Recently, the topic of many dentist-patient conversations has been dental radiation. Dentists should be able to calmly discuss this subject with knowledge and intelligence. Patients should be educated to realize that the measurement of radiation is a complicated, difficult procedure. Reassurance should be given that dentists have their patients' interest and safety in mind when requiring X-rays as part of diagnostic procedures.

SCHOOL OF DENTISTRY  
UNIVERSITY OF NORTH CAROLINA  
CHAPEL HILL, NORTH CAROLINA

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# Study Club

## Activities

in

## North Carolina

BAXTER B. SAPP, JR., D.D.S.  
Chairman  
Statewide Study Club Committee

### Two More Clubs Proposed

#### Proposed Hypnodontic Study Club

In the past few years there has been a steadily growing interest in hypnosis as applied to dentistry. Its techniques have been overwhelmingly accepted and practiced by some, while others have regarded these practices in strict abeyance. Your Editor does not attempt to justify the position of either school of thought but to call attention to the fact that when properly applied hypnodontics can be a very useful adjunct to a dental practice, yet improper applications can result in very serious consequences. Therefore, accredited training of from 30 to 45 hours is needed.

Nineteen men of varied experience from different areas of the state have voiced their interest in the organization of a Hypnodontic Study Club. We hope a notice of their first meeting can be announced in the near future. Requirements for the club are interest and a desire to learn.

#### Proposed Dental Radiology Study Club

Anyone interested in organizing a Dental Radiology Study Club is asked to contact Dr. Clifton E. Crandell, UNC School of Dentistry, Chapel Hill. An interest in Radiology is the only qualification.

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#### Charlotte Dental Study Club

This group meets four times a year. Dr. Seymour Kreshover was the speaker at their most recent meeting. Their subject: Review of Research on the National Level.

#### Burlington Dental Study Club

This very progressive club has adopted a study of Operative Dentistry for the coming year. Dr. Roger

Sturdevant of the UNC School of Dentistry got the "ball rolling" at their first program in June.

#### Raleigh Dental Study Club

The Raleigh Dental Study Club meets the second Tuesday each month. Dr. F. D. Bell is Chairman, Dr. Clifton E. Crandell is Vice-Chairman and Secretary, and Dr. T. E. Perry is Treasurer. Drs.

Roy E. Gaines, David B. Masters and J. M. McAllister compose the Program Committee.

In May "The Classification of Periodontal Diseases" was presented by Dr. Roy E. Gaines. The June meeting was held at Fort Bragg with Dr. William C. Hurt speaking on "Indications and Techniques for Gingivectomies" following an afternoon of golf, a social hour and dinner at the Officers Club.

Dr. David B. Masters spoke at the July meeting on "Gingival Enlargement."

### **Guilford Prosthetic Study Club**

This newly formed club held their last meeting in the office of Dr. C. W. Poindexter in Greensboro and participated in a group clinical program on Complete Dentures.

### **Rough Butt Bald Dental Study Club**

Some individuals have inquired as to the origin of the unusual name of this club. Fred Ogden, one of the members, informs us that it is named for a remote, but beautiful mountain in western North Carolina on the Haywood-Transylvania County line. Dr. Breece Breland was host to the club at a recent meeting.

### **Ernest A. Branch Dental Study Club**

Dean Brauer of the UNC School of Dentistry spoke on "The Significance of Ernest Branch to Dentistry" and "The Significance of Dental Study Clubs" at the July meeting. He also presented "The Relationship of Diet and Endocrine to the Development of Teeth and Jaws" at

the meeting and Dr. Pearce Roberts, Jr., of Asheville spoke on "The Analysis of Professional Practice."

### **Piedmont Dental Study Club**

This club held a joint meeting with the Guilford County Dental Society in May with Dr. Harry Healey speaking on Endodontics.

### **Demeritt Pedodontic Study Club**

The Demeritt Pedodontic Study Club will present table clinics at the ADA meeting in Los Angeles, October 17-20.

At its May meeting the group elected the following officers: Dr. William L. Hand, Jr., of New Bern, President; Dr. Lewis Lee of Wilson, Vice President; and Dr. Donald Bland of Wallace, Secretary-Treasurer.

The next scheduled meeting will be in September when Dr. Tom Fleming of Tarboro, Dr. Ben Houston of Goldsboro and Dr. R. B. Barden of Wilmington will present a clinic.

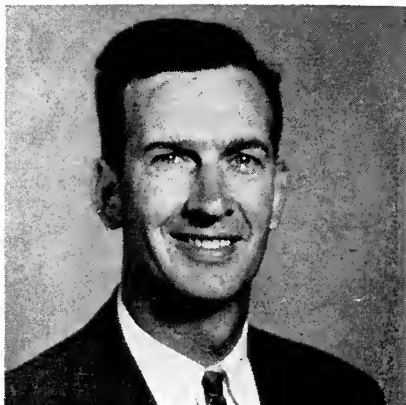
### **Pedodontic Study Group for Western North Carolina**

The second meeting of the recently organized Pedodontic Study Group for western North Carolina was held July 15 at the Jarrett House in Dillsboro. Dr. John C. Brauer, Dean, UNC School of Dentistry was the guest speaker.

The ruling board of the group is composed of Dr. Patsy McGuire of Sylva, Dr. Barry Miller of Charlotte and Dr. Marion Ralls of Greensboro.

# **First District to Meet October 1-3**

AUBURN L. POOVEY, D.D.S.  
*President*



The 39th annual meeting of the First District Dental Society will be held in Asheville at the Grove Park Inn, October 1, 2, 3. As spokesman for the officers of the Society, may I invite and urge you to attend this annual meeting, and extend a special invitation to the Officers of The North Carolina Dental Society and to members of other Districts.

Our Saturday evening affairs have been so successful and entertaining that we, once again, have a full evening designed for your pleasure. There will be a fellowship hour at 6:00 p.m. immediately followed by a cabaret party with wonderful food, then dancing until 12:30.

On Sunday we urge all golfers to participate in the tournament at the Asheville Country Club. Sunday evening at 7:00 p.m. a buffet will be held in the Plantation Room of the Grove Park Inn. Don't miss this unusual display of wonderful food and the good fellowship with your colleagues. All dentists, their ladies and honor guests are urged to come.

We are anticipating splendid scientific sessions and are fortunate in having two outstanding clinicians for our meeting this year. Dr. Richard L. Simpson of The Medical College of Virginia School of Dentistry will present "Let's Look at Our Fixed Restorations." He is the present instructor of Crown and Bridge Prosthodontics at the School of Dentistry.

"A Contemporary Philosophy of Periodontology" will be given by Dr. F. B. Wiebusch, also an instructor at the School of Dentistry of the Medical College of Virginia.

Table clinics will be presented at 8:30 a.m. on Monday, October 3. We know that you will find these special table clinics of great interest and importance. The committee chairmen have gone to great lengths to make this meeting entertaining, scientific and educational. Consequently, since this meeting is for you, let us make this the best attended annual affair in the history of the First District.



# **Program**

## **First District Dental Society**

**GROVE PARK INN, ASHEVILLE**  
**OCTOBER 1-3, 1960**

### **Saturday, October 1**

<b>4:00- 6:00 p.m.</b>	Registration, Lobby
<b>6:00- 7:00 p.m.</b>	Social Hour
<b>7:00 p.m.-12:30 a.m.</b>	Harvest Feast and Cabaret Party with informal dancing to the music of the Esquire Band

### **Sunday, October 2**

<b>11:00 a.m.</b>	Golf Tournament, Asheville Country Club
<b>2:00- 6:30 p.m.</b>	Registration, Lobby
<b>2:30- 5:00 p.m.</b>	Projected Film Clinics, Laurel Terrace
<b>6:00- 7:00 p.m.</b>	Social Hour with Introduction of State Officers and Prospective Members
<b>7:00 p.m.</b>	Buffet, Plantation Room
<b>8:30 p.m.</b>	General Session, Laurel Terrace
	Call to Order—Dr. A. L. Poovey, President
	Invocation—Dr. W. D. Yelton
	Necrology Report—Dr. W. D. Yelton
	Introduction of Visitors
	Minutes of Last Meeting—Dr. A. T. Lockwood
	Treasurer's Report—Dr. A. T. Lockwood
	Receiving of Membership Applications
	Charge to New Members—
	Dr. C. Z. Candler, Jr.
	Committee Reports
	Old Business—New Business
	Election of Officers
	Adjournment

### **Monday, October 3**

<b>8:30-10:00 a.m.</b>	Table Clinics
<b>10:30 a.m.-12:00 noon</b>	"A Contemporary Philosophy of Periodontology" Dr. F. B. Wiebusch, Medical College of Virginia, Richmond, Virginia
<b>12:30 p.m.</b>	Luncheon
<b>2:00 p.m.</b>	"Let's Look at Our Fixed Restorations" Dr. Richard L. Simpson, Medical College of Virginia, Richmond, Virginia
<b>3:30 p.m.</b>	Final Business Session
	Installation of Officers
	Awarding of Golf Prizes
	Adjournment

# First District Dental Society

1959-1960

## OFFICERS

Auburn L. Poovey.....	President
Dennis S. Cook.....	President-Elect
F. S. Cunningham.....	Vice President
Allen T. Lockwood.....	Secretary-Treasurer
M. M. Forbes.....	Editor

## EXECUTIVE COMMITTEE

A. T. Lockwood, Chairman

A. L. Poovey  
M. M. Forbes  
John W. Girard

D. S. Cook  
F. S. Cunningham  
H. D. Froneberger

## COMMITTEES

**Audit**—W. J. Turbyfill, Chairman; Frank E. Martin, K. M. Ray.

**Clinic**—J. T. Adair, Chairman; S. H. Isenhower, W. L. Woody, W. T. Pennell, R. G. Mauney.

**Constitution and Bylaws**—Ralph L. Falls, Chairman; C. W. McCall, C. C. Diercks.

**Ethics**—A. C. Current, Jr., Chairman; A. P. Cline, John L. Yelton.

**Golf**—R. R. Hoffman.

**Hospitality**—C. Z. Candler, Jr., Chairman; M. W. Carpenter.

**Local Arrangements**—John W. Girard, Chairman; C. G. Walker, W. E. Ryon, III.

**Membership**—F. S. Cunningham, Chairman; C. W. Conrobert, Jr., R. B. Sams, W. T. Hargrove, C. H. Keels, Jr.

**Necrology**—W. D. Yelton, Chairman; J. T. Mize, R. S. McCall.

**Nominating** — H. D. Froneberger, Chairman; Pearce Roberts, Jr., Ralph D. Coffey.

**Program**—D. S. Cook, Chairman; F. C. Shaw, P. P. Yates, R. H. Graham.

**Publicity**—M. M. Forbes, Chairman; C. A. Pless, Jr., C. Don Gerdes.

**Relief**—Walter E. Clark, Chairman; C. Frank Rich, H. T. Sain.

# First District Essayists

F. B. WIEBUSCH, D.D.S.  
Richmond, Virginia

Dr. Wiebusch is Associate Professor and Chairman of the Department of Oral Diagnosis of the Medical College of Virginia School of Dentistry. A Diplomate of the American Board of Periodontology, he is a graduate of the University of Texas School of Dentistry and has completed post graduate studies in Periodontology at New York University College of Dentistry and the University of Pennsylvania.



**Monday, October 3**

**10:30 a.m.**

## "A CONTEMPORARY PHILOSOPHY OF PERIODONTOLOGY"

As general dentistry peers into the mirror, periodontics is reflected as the image of its foundation. The need for viewing periodontal diagnosis, etiology, and treatment planning from a distant vantage point, giving opportunity for a wide perspective, will be discussed. Kodachrome transparencies of clinical cases will be used to illustrate the lecture material.

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RICHARD L. SIMPSON, D.D.S.  
Richmond, Virginia



Dr. Simpson is Professor of Crown and Bridge Prosthodontics at the Medical College of Virginia School of Dentistry. He is a Regional Consultant with the Veterans Administration Hospital, a charter member of the American Academy of Crown and Bridge Prosthodontics and a Fellow of the American College of Dentists.

**Monday, October 3**

**2:00 p.m.**

## "LET'S LOOK AT OUR FIXED RESTORATIONS"

This discussion will include some of the fundamental principles which should be considered in the construction of fixed bridges such as retention, occlusal harmony, stability and the like.

# **First District**

## **Table Clinics**

**Monday, October 3**

**8:30 a.m.-10:00 a.m.**

1. **The Immediate Partial Salt and Pepper Technique and Space Maintainers by the Same Technique**, Fred N. Ogden, D.D.S., Waynesville.
2. **A Simple and Helpful Mortice Rest**, Claude Sherrill, D.D.S., Asheville.
3. **Method of Bleaching Non Vital Anterior Teeth**, Hugh H. Cole, D.D.S., Candler.
4. **Technique for Construction of Acrylic Jacket Crown**, Y. H. Eaker, D.D.S., Forest City.
5. **Construction of Full Upper and Lower Dentures**, Charles Abernethy, D.D.S., Forest City.
6. **Orthodontics for the General Practitioner**, Clarence W. Canrobert, Jr., D.D.S., Conover.
7. **A Follow-Up Case History of Autogenous Transplant**, Ralph L. Falls, D.D.S., Morganton.

# **Second District Meeting in Winston-Salem**

WILLIAM F. YELTON, D.D.S.  
*President*



The Second District Dental Society will hold its fortieth annual meeting at the Hotel Robert E. Lee in Winston-Salem, September 25-26, 1960.

Your committees have worked hard during the past year preparing for you a most interesting and enjoyable program. The format of the program will follow the same pattern as last year.

Two fine guest speakers have been obtained and will speak on subjects that will be of much interest to members in our district. Also, some fine

entertainment is being planned for your enjoyment.

Let me urge all members in our district to be present at this fortieth meeting. The Second District, as always, extends a cordial invitation to members of other districts to meet with us.

In closing, I would like to express my appreciation to all the officers, committees and the Auxiliary for their help in making this meeting a memorable occasion.

# Second District Dental Society

1960-1961

## OFFICERS

William F. Yelton.....	President
James A. Harrell.....	President-Elect
Fleming H. Stone.....	Vice President
James E. Graham, Jr.....	Secretary-Treasurer
O. J. Freund.....	Editor

## EXECUTIVE COMMITTEE

Boyce A. Brawley, Chairman

James A. Harrell	James E. Graham, Jr.
Robert G. Taylor	Fleming H. Stone
William F. Yelton	

## COMMITTEES

**Auditing**—Horace P. Reeves, Chairman; L. H. Short, Paul A. Stroup, Jr., James A. Harrell.

**Constitution and Bylaws**—James A. Harrell, Chairman; W. B. Sherrod, Thomas G. Nisbet, Henry C. Harrelson, Jr.

**Entertainment**—Richard F. Scherer, Chairman; Norman J. Duncan, Kenneth B. Moser, Kenneth H. Meadows.

**Ethics**—H. K. Crotts, Chairman; Boyce A. Brawley, F. C. Slaughter, Charles A. Jarrett.

**Insurance**—R. Philip Melvin, Chairman; William C. Current, G. C. Stowe, Jr., Floyd J. Southard.

**Local Arrangements**—J. Harry Spillman, Chairman; Thomas A. Smith, John R. Williams, Noah D. Fox.

**Membership**—Fleming H. Stone, Chairman; Joe V. Davis, Jr., Gilbert W. Yokeley, Robert A. George, R. G. Taylor, J. P. Bingham, Jr.

**Necrology**—Thomas N. Hamer, Chairman; David L. Beavers, Broadus E. Jones, John W. Zimmerman, Jr.

**Nominating**—H. W. Thompson, Chairman; J. P. Reece, R. E. Spoon, Jr., J. Donald Kiser.

**Program**—Carl A. Barkley, Chairman; Glenn A. Lazenby, Jr., Charles M. Westrick, James E. Graham, Jr.

**Public Relations**—O. J. Freund, Chairman; L. F. Bumgardner, H. C. Jent, William E. Crow.

**Relief**—Donald W. Morris, Chairman; H. H. Levine, C. D. Wheeler, Thomas A. Blair.

**Study Club**—E. M. Funderburk, Chairman, James C. Strupe, Robert W. Clinard, Frank R. Graham.

**Table Clinics**—J. C. Farthing, Chairman; C. W. Bentley, William S. Kirk, G. C. Stowe, Jr., Robert C. Helsabeck, Dwight A. Jackson.

# **Program**

## **Second District Dental Society**

**HOTEL ROBERT E. LEE, WINSTON-SALEM**  
**SEPTEMBER 25-26, 1960**

### **Sunday, September 25**

<b>11:00 a.m.- 5:00 p.m.</b>	Registration, Mezzanine
<b>12:00 noon</b>	President's Luncheon, Salem Room
<b>1:00 p.m.</b>	Executive Committee, Salem Room
<b>5:30 p.m.</b>	Social Hour, Winston and Salem Rooms
<b>6:30 p.m.</b>	Annual Banquet
	Welcome and Recognition of Visitors and Guests
	Introduction of New Members
	Entertainment
<b>8:30 p.m.</b>	Opening Session, Winston Room
	Call to Order, Dr. W. F. Yelton, President
	Invocation
	Introduction of Guests and Visitors
	Introduction of State Officers
	The President of the North Carolina Dental Society
	Committee Reports
	Necrology
	Nominating
	Election of Officers

### **Monday, September 26**

<b>9:00 a.m.- 2:00 p.m.</b>	Registration, Mezzanine
<b>9:00-10:15 a.m.</b>	Table Clinics, Salem Room
<b>10:30-11:30 a.m.</b>	Dr. Dayton D. Krajicek, Winston Room
<b>11:30 a.m.-12:30 p.m.</b>	Dr. Julius A. Howell, Winston Room
<b>1:00 p.m.</b>	Luncheon, Hotel Roof Garden
	Election of Officers
	President's Report
<b>2:30- 3:30 p.m.</b>	Dr. Julius A. Howell, Winston Room
<b>3:30- 4:30 p.m.</b>	Dr. Dayton D. Krajicek, Winston Room
<b>4:30 p.m.</b>	Business Session
	Installation of Officers
	Adjournment

# Second District

## Table Clinics

Monday, September 26

9:00 a.m.-10:15 a.m.

1. **Check-Bite Impression Procedure**, W. E. Crow, D.D.S., Bill J. Christian, D.D.S., Winston-Salem.
2. **Insertion of Anterior Plastic Fillings**, Thomas A. Smith, D.D.S., Winston-Salem.
3. **Instance of Congenitally Missing Teeth**, James G. Strupe, D.D.S., Winston-Salem.
4. **Children's Dentistry**, Carlton V. Winter, D.D.S., Charlotte.
5. **Endodontia**, L. Doyle Pruett, D.D.S., Elkin.
6. **Practical Use of Bite-Wing X-Rays in Daily Practice**, M. S. Thurston, D.D.S., Salisbury; C. F. Sherman, D.D.S., Granite Quarry.



# Second District Essayists

DAYTON D. KRAJICEK, D.D.S.  
Wadsworth, Kansas



Dr. Krajicek is Chief of Dental Service at the Veteran's Administration Hospital, Wadsworth, Kansas, and is Assistant Clinical Professor of Prosthetic Dentistry at the University of Kansas City School of Dentistry. He is a member of the American Denture Society, the American Equilibration Society and the American Society of Geriatric Dentistry, a Diplomate of the American Board of Prosthodontics and a Fellow of the American College of Dentists.

**Monday, September 26**

**10:30 a.m. and 3:30 p.m.**

## SIMULATION OF NATURAL APPEARANCE IN COMPLETE DENTURE CONSTRUCTION



JULIUS A. HOWELL, M.D.  
Winston-Salem, N. C.

Dr. Howell is Instructor in Plastic Surgery at the Bowman Gray School of Medicine in Winston-Salem. He is a graduate of Wake Forest College and received his M.D. Degree from the University of Pennsylvania.

**Monday, September 26**

**11:30 a.m.**

## INTRA-ORAL MALIGNANCY: DETECTION AND MANAGEMENT

Methods of examination in detecting early and late malignancy of the lips, tongue and buccal area, palate and gums will be discussed. Etiology of both malignant and pre-malignant lesions will be included. The symptoms, diagnoses, pathology, and surgical management of the different types of malignant lesions of the oral cavity will be covered. A series of slides to illustrate each type of malignancy will be shown.

**Monday, September 26**

**2:30 p.m.**

## MINOR SURGERY OF THE MOUTH

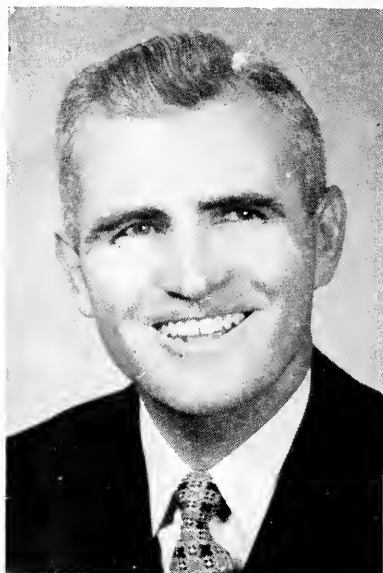
Methods of handling various minor traumatic conditions will be discussed, including lacerations, puncture wounds, avulsion injuries, etc. The technique of suturing such minor wounds within the mouth will be described. The proper method of performing a biopsy for various malignant lesions and the technique of excision of small benign tumors will be elaborated upon. A series of slides will be shown to illustrate the above points.

# **Sedgefield Inn**

## **An Ideal**

### **Meeting Spot**

GUY R. WILLIS, D.D.S.  
*President*



The Third District Dental Society is planning one of the finest and most informative meetings in its history for this year, September 18 and 19.

As has been demonstrated many times over the past years, the Sedgefield Inn in Greensboro offers an ideal location to conduct our meeting.

As usual, we will begin our meeting with the golf tournament at 11 a.m. on Sunday, September 18.

Registration will begin at 2 p.m. on Sunday, followed by a Social Hour at 5:30 p.m. and a banquet at 7:00. Our arrangements committee has worked hard to provide us with some pleasant entertainment for the banquet.

The opening session will follow the banquet, the highlights of which will be recognition of visitors, welcoming of new members, and election of officers.

On Monday, we will begin our scientific program. Our Clinics Committee chairman and his committee assures us a very interesting table

clinic program. Our program committee, under the direction of our President-Elect, has obtained two outstanding speakers. Dr. R. A. McEwen from Atlanta, Georgia, will present a timely analysis of high speed in modern dentistry, and Dr. Edward C. Dobbs from Baltimore, Maryland, will discuss "Dental Emergencies and How to Prevent and Treat Them."

Our meeting will close with the final business session, at which time the officers for next year will be installed.

I am very grateful to the officers, committees, and members who have worked so hard to make this, the forty-first annual meeting of the Third District Dental Society, a success.

I wish to extend a cordial welcome to all members of our District, the State, and other states, along with the Ladies Auxiliary to join with us at Sedgefield to make this the finest meeting in the history of the Third District.

# **Program**

## **Third District Dental Society**

**SEDGEFIELD INN, GREENSBORO**  
**SEPTEMBER 18-19, 1960**

### **Sunday, September 18**

<b>11:00 a.m.</b>	Golf Tournament
<b>2:00 p.m.</b>	Registration
<b>5:30- 6:30 p.m.</b>	Social Hour
<b>7:00 p.m.</b>	Banquet—Entertainment Invocation—Dr. Henry C. Carr
<b>8:30 p.m.</b>	Opening Session (Business Meeting) Call to Order—Dr. Guy R. Willis, President Invocation—Dr. John S. Dilday President's Address Report of Secretary-Treasurer, Dr. C. W. Poindexter Recognition of State Officers— Dr. Guy R. Willis Introduction of Visitors—Dr. R. Bruce Warlick Presentation of New Members— Dr. C. W. Poindexter Charge to New Members—Dr. Norman F. Ross Election of Officers Announcements Adjournment

### **Monday, September 19**

<b>8:00 a.m.</b>	Breakfast
<b>8:00- 9:00 a.m.</b>	Registration
<b>9:00 a.m.-10:15 a.m.</b>	Table Clinics
<b>10:30 a.m.-12:30 p.m.</b>	"An Analysis of High Speed"—Dr. R. A. McEwen Luncheon and Golf Luncheon
<b>12:45- 2:00 p.m.</b>	"The Prevention and Treatment of Emergencies in the Dental Office"—Dr. Edward C. Dobbs
<b>2:00- 3:30 p.m.</b>	Final Business Session Committee Reports Report on the President's Address Old—New Business Selection of New Meeting Place Installation of New Officers Adjournment
<b>3:30 p.m.</b>	

# Third District Dental Society

1960-1961

## OFFICERS

Guy R. Willis.....	President
W. P. Hinson, Jr.....	President-Elect
R. Bruce Warlick.....	Vice President
C. W. Poindexter.....	Secretary-Treasurer
B. B. Sapp, Jr.....	Editor

## EXECUTIVE COMMITTEE

Robert W. Sugg, Chairman

Guy R. Willis	C. W. Poindexter
R. Bruce Warlick	H. Estes Butler
W. P. Hinson, Jr.	M. L. Cherry

## COMMITTEES

**Arrangement**—T. E. Sikes, Jr., Chairman; J. D. Southworth, S. T. Hart.

**Auditing**—Henry V. Murray, Jr., Chairman; Robert L. Bridger, D. M. Getsinger.

**Clinic**—A. Dwight Price, Chairman; Marion L. Ralls, Jr., Robert H. Sager.

**Constitution and Bylaws**—Charles T. Byerly, Jr., Chairman; Robert Lee Daniel, Everette R. Teague.

**Ethics Committee**—C. C. Poindexter, Chairman; E. R. Burns, Maurice B. Richardson.

**Golf**—W. L. Saunders, Chairman; Walter H. Moore, Richard J. Citrini.

**Legislative**—Murray W. Holland, Chairman; P. M. Cummings, Jr., M. E. Walker.

**Membership**—R. Bruce Warlick, Chairman; R. S. Turner, W. B. Gilbert, Jr.

**Necrology**—D. T. Carr, Chairman; B. E. Kanoy, M. P. Blair.

**Program**—W. P. Hinson, Jr., Chairman; Charles H. Teague, C. W. Horton.

**Public Education**—Thomas A. Blum, Chairman; John B. Sowter, Roy G. Adams.

**Publicity**—Thomas L. Dixon, Chairman; C. F. Clark, Jr., W. M. Ditto.

**Relief**—J. Ernest Roberts, Chairman; M. E. Newton, H. X. Bowling.

# Third District Essayists

EDWARD C. DOBBS, D.D.S.  
Baltimore, Maryland



Dr. Dobbs is Professor of Pharmacology and Therapeutics, School of Dentistry University of Maryland. He is the author of *Pharmacology and Dental Therapeutics* and a contributor to several dental publications. He received his D.D.S. Degree from the University of Maryland, is a Fellow of the American College of Dentists and a member of the American Academy of Dental Medicine.

**Monday, September 19**

**2:00 p.m.**

## PREVENTION AND TREATMENT OF EMERGENCIES IN THE DENTAL OFFICE

The lecture and demonstrations will be concerned with local complications and systemic emergencies which may occur in the dental office. Emphasis will be placed on the detection of those predisposing causes which foster dental emergencies. Particular emphasis will be given to those reactions which occur following the use of the local anesthetic and antibiotic drugs. A list of essential drugs and the necessary armamentarium for their use will be described with special emphasis on oxygentherapy.

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R. A. McEWEN, D.D.S.  
Atlanta, Georgia

Dr. McEwen was graduated from the University of Alberta where he served as Associate Professor from 1946-49. He was Professor and Chairman of the Fixed Prosthesis Clinic at Emory University School of Dentistry from 1950-55. He is currently in private practice and has been engaged in research in the field of accelerated operative methods. Some of his work has been published in leading publications.

**Monday, September 19**

**10:30 a.m.**

## AN ANALYSIS OF HIGH SPEED

This presentation will include the latest information on speeds above the vibration perception with the application and instrumentation for all types of intra- and extracoronal preparations.

# Third District

## Table Clinics

Monday, September 19

9:00-10:15 a.m.

1. **Case Procedure for Crown and Bridge**, Norman F. Ross, D.D.S. and Baxter B. Sapp, Jr., D.D.S., Durham.
2. **Pedodontia for the General Practitioner**, James B. King, D.D.S., Pittsboro.
3. **Preventive Orthodontics for General Practice**, Maurice B. Richardson, D.D.S., Albemarle.
4. **Cold Polymerization Under Pressure, An Office Procedure**, H. Estes Butler, D.D.S., Greensboro.
5. **Immediate Denture Technique**, Movie Film, L. G. Page, D.D.S., Yanceyville.
6. **The Mandibular Lateral Incisor**, Galen W. Quinn, D.D.S., Durham.

# **A Significant Birthday—40**

J. B. POWELL, D.D.S.  
*President*



On Monday and Tuesday, September 26 and 27, the Fourth District Dental Society will hold its fortieth annual meeting. We invite all of our friends to come and to enjoy with us this festive and educational meeting.

Many of us know the significance of a fortieth birthday, but let me assure you that it is but a pause to gain greater strength and vitality in the years ahead. We had a tremendous turn-out last year, and this year we would like to have 100 per cent

attendance. I would like to appoint each member of this society to a working committee to call his friends in the society and ask them to join us on this memorable date. For those who may hesitate to come because it has been a while since attending a meeting, let me say that you will receive a warm and friendly reception. You will feel the firm grip of many fine and wonderful people. Come and "give of yourself" just a little.

# Fourth District Dental Society

1960-1961

## OFFICERS

J. B. Powell.....	President
Thomas G. Collins.....	President-Elect
J. S. D. Nelson.....	Vice President
C. P. Osborne, Jr.....	Secretary-Treasurer
W. I. Herring.....	Editor

## EXECUTIVE COMMITTEE

Thomas G. Collins, Jr., Chairman

J. B. Powell	J. S. D. Nelson
C. P. Osborne, Jr.	K. L. Johnson
T. M. Hunter	

## COMMITTEES

**ADA Relief**—Wilbert Jackson, Chairman; G. Fred Hale, S. L. Bobbitt.

**Clinic**—Glenn F. Bitler, Chairman; Lloyd B. Stanley, Thomas E. Nelson, Jr.

**Constitution and Bylaws**—Walter H. Finch, Jr., Chairman; C. E. Abernethy, C. W. Sanders.

**Entertainment**—J. Henry Ligon, Jr., Chairman; E. D. Baker, R. S. Hunter.

**Ethics**—Glenn L. Hooper, Chairman; W. Howard Branch, D. L. Pridgen.

**Hospitality**—Paul Fitzgerald, Jr., Chairman; F. D. Bell, W. P. Marshall, Jr.

**Membership**—J. S. D. Nelson, Chairman; T. M. Hunter, R. H. Turlington.

**Mental Institutions**—John L. Prugh, Chairman; Roy E. Gaines, Darwin N. McCaffity.

**Necrology**—M. R. Smith, Chairman; Clarence S. Olive, Morris L. Bell.

**Post Graduate Study**—Luther J. Moore, Jr., Chairman; J. Raymond Edwards, Jr., Francis H. Biddell.

**Program**—Nash H. Underwood, Chairman; H. O. Lineberger, Jr., T. G. Collins.

**Publicity**—J. A. Pearce, Chairman; J. M. McAllister, C. M. Kistler.

**School Health**—D. W. Seifert, Jr., Chairman; Newton Smith, W. G. Lee.



# **Program**

## **Fourth District Dental Society**

**SIR WALTER HOTEL, RALEIGH**  
**SEPTEMBER 26-27, 1960**

### **Monday, September 26**

- 6:00 p.m.** Social Hour
- 7:00 p.m.** Banquet
- 9:30 p.m.** Dance

### **Tuesday, September 27**

- 8:30 a.m.** Registration
- 9:00 a.m.** Opening Session—Dr. J. B. Powell
  - Invocation—Dr. Wilbert Jackson
  - Report of Secretary-Treasurer—Dr. C. P. Osborne, Jr.
  - President's Address
  - Recognition of North Carolina Dental Society Officers and Guests
  - Committee Reports
  - Report of Necrology Committee—Dr. M. R. Smith
  - Report of Membership Committee—Dr. J. S. D. Nelson
  - Election of Applicants to Membership
  - Charge to New Members
  - Announcements
- 11:00 a.m.** Table Clinics
- 12:30 p.m.** Luncheon
- 1:30 p.m.** "Recent Advances in Operative Dentistry"—  
Dr. José E. Medina
- 3:30 p.m.** General Session
  - Adjournment

# Fourth District Essayist

JOSÉ E. MEDINA, D.D.S.  
Baltimore, Maryland

A graduate of Baltimore College of Dental Surgery, University of Maryland, Dr. Medina is professor and acting head of operative dentistry, a staff member of the University Hospital in Baltimore, a lecturer at Walter Reed Army Medical Center, Washington, D. C., and consultant for United States Public Health Service Hospital in Baltimore.

Dr. Medina is director of a postgraduate course in advanced speeds and has presented approximately 30 table clinics, registered clinics, chair clinics, television clinics.



Tuesday, September 27

1:30 p.m.

## RECENT ADVANCES IN OPERATIVE DENTISTRY

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### Table Clinics

Monday, October 10

12:00 noon-1:00 p.m.

1. **Simplified Crown and Bridge Technique**, William M. Heeden, Jr., D.D.S., Benson.
2. **Appliance Therapy for the Correction of Cross Bites in the Mixed Dentition**, Henry S. Zaytoun, D.D.S., Raleigh.
3. **Chair-Side Convincing Through Slide Projection**, R. H. Turlington, D.D.S., Clinton.
4. **Clinical Consideration of Stannous Fluoride**, J. Fred Sproul, D.D.S., Raleigh.
5. **Technique for Dental Transplants**, Jere Roe, D.D.S., Raleigh.
6. **Emergency Cart**, Cecil R. Lupton, D.D.S., Chapel Hill.

# Rocky Mount Host to Fifth District

WILLIAM H. GRAY, JR., D.D.S.  
*President*



The Fifth District Dental Society wishes to extend an invitation to the members of the North Carolina Dental Society and the Auxiliary to our annual meeting in Rocky Mount on October 9 and 10. We think we have one of the best districts in the state, and that the warm hospitality and fellowship along with the educational program will challenge you to meet with us.

At our last meeting in Elizabeth City the District voted to hold our next meeting aboard ship. The Executive Committee approved this motion and plans were made for a dental cruise. In January, 1960 the officers signed an agreement with definite dates and reservations for a cruise to Nassau aboard the *Ariadne* of the Hamburg-American Line. On May 24, 1960, the travel agency advised that they had cancelled our contract for a ship early in November and offered another ship for early December. The Executive Committee disapproved of this late date for a meeting. No other ship sailing from a North Carolina port was found available for a dental cruise. And so,

we were glad to accept the invitation from Rocky Mount to hold our meeting there.

Drs. R. A. Daniel, H. A. Edwards, and Wesley Gooding of the Program and Clinic Committees have secured some very fine and interesting scientific presentations for Monday's program. I believe they will meet with your approval.

The Arrangements Committee has assured me that they are planning a banquet with entertainment for Sunday night and a special feature for the ladies for Monday morning. I therefore urge you to bring your wives who are showing more interest in our meetings each year. They are an asset to the dental profession.

I want to thank each member who had a part in this year's program and who have been co-operative and congenial in every way.

Let's all get on the bandwagon going to Rocky Mount on October 9. Be sure to bring your wife, ask your dental assistant and the new young dentist in your town. Support your profession by attending the meetings.

# Fifth District Dental Society

1960-1961

## OFFICERS

William H. Gray, Jr.	President
R. A. Daniel, Jr.	President-Elect
W. M. Spence	Vice President
R. B. Barden	Secretary-Treasurer
Roy A. Miller	Editor

## EXECUTIVE COMMITTEE

W. H. Gray, Jr., Chairman

R. A. Daniel, Jr.	W. M. Spence
R. B. Barden	C. E. Minges
W. L. Hand	

## COMMITTEES

**Arrangements and Publicity**—Charles Godwin, Chairman; J. A. Ward, M. M. Lilley, T. S. Fleming, David Jackson, Richard F. Hunt, Jr., E. L. Eatman, Herbert Fuerst, Coyte Minges.

**Auditing**—M. M. Lilley, Chairman; Charles B. Johnson, W. T. Ralph.

**Constitution and Bylaws**—Z. L. Edwards, Sr., Chairman; J. M. Kilpatrick, C. D. Eatman.

**Dental Caries**—W. W. Umphlett, Chairman; E. G. Boyette, Lloyd Griffin.

**Ethics**—Clyde E. Minges, Chairman; R. H. Gilbert, Darden J. Eure.

**Membership**—W. M. Spence, Chairman; A. R. Fales, M. W. Aldridge, B. H. Houston, A. L. Stoddard.

**National Children's Dental Health Week**—James Lee, Chairman; M. B. Ausley, Donald L. Henson, R. B. Barden, W. L. Hand, B. H. Houston, T. S. Fleming, Donald Bland, C. P. Godwin, Lewis Lee, Z. L. Edwards, Jr.

**Necrology**—Dewey Boseman, Chairman; E. K. Wright, J. E. Fraser.

**Program**—R. A. Daniel, Jr., Chairman; Z. L. Edwards, Jr., Richard F. Hunt, Jr.

**Resolutions**—A. T. Jennette, Chairman; Charles T. Barker, Arthur Gollobin.

**Study Club**—M. B. Ausley, Chairman; W. E. Kidd, Charles S. Cooke.

**Table Clinic**—H. A. Edwards, Co-Chairman; H. W. Gooding, Co-Chairman; James M. Zealy, A. D. Johnson, J. E. Furr, F. R. Ferro, W. L. Hammond.

# **Program**

## **Fifth District Dental Society**

**RICKS HOTEL, ROCKY MOUNT**  
**OCTOBER 9-10, 1960**

### **Sunday, October 9**

<b>1:00 p.m.</b>	Golf Tournament—Benvenue Country Club
<b>3:00 p.m.</b>	Registration—Lobby, Ricks Hotel
<b>4:00 p.m.</b>	Final Meeting, Executive Committee
<b>5:30- 6:30 p.m.</b>	Fellowship Hour
<b>7:00 p.m.</b>	Banquet
	Invocation—The Reverend Hoke Ritchie
	Address of Welcome
	Introduction of Guests
	Guest Speaker—Mr. Jake Winstead
	Announcements
	Entertainment—Door Prizes

### **Monday, October 10**

<b>8:00- 9:00 a.m.</b>	Registration
<b>9:00 a.m.</b>	General Session
	Call to Order—Dr. W. H. Gray, Jr., President
	Invocation
	Minutes of Last Meeting
	Secretary-Treasurer's Report
	President's Address
	Report of Necrology Committee
	Presentation of New Applicants
	Charge to New Members
	Greetings from N.C.D.S. Officers
	Introduction of Guests
	Election of Officers
<b>10:30 a.m.</b>	"What Do We Want in Our Fixed Restorations?"— Richard L. Simpson, D.D.S., F.A.C.D., Medical College of Virginia, Richmond, Va.
<b>12:00 noon</b>	Table Clinics
<b>1:00 p.m.</b>	Luncheon
<b>2:00 p.m.</b>	Business Session
	Committee Reports
	Report on President's Address
	New Business
	Installation of Officers
	Adjournment

# Fifth District Essayist

RICHARD L. SIMPSON, D.D.S.  
Richmond, Virginia



Dr. Simpson is Professor, Crown and Bridge Prosthodontics, Medical College of Virginia; Regional Consultant Veterans Administration Hospital; member of the American Academy of Crown and Bridge Prosthodontics; Fellow, American College of Dentists; President-Elect, Virginia State Dental Association; Graduate, Medical College of Virginia.

**Monday, October 10**

**10:30 a.m.**

## **"WHAT DO WE WANT IN OUR FIXED RESTORATIONS?"**

This essay will include some of the fundamental principles which should be considered in the construction of fixed bridges, such as stability, retention, occlusal harmony, sanitation, esthetics, etc. Something will be said about the construction of bridges by the indirect technique.

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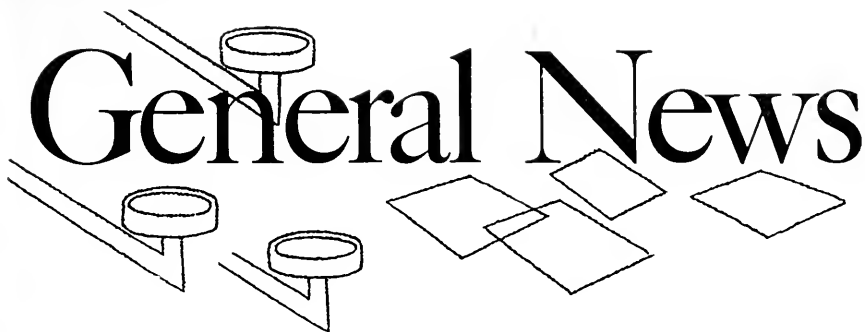
## **Table Clinics**

**Monday, October 10**

**12:00 noon-1:00 p.m.**

1. **Surgical Aid in Prosthetic Denture Construction**, Grover W. Smith, D.D.S., Kinston.
  2. **Periodontics in Everyday Practice**, Capt. Charles Pridgeon, DC USN, Camp Lejeune.
  3. **Consideration in Complete Denture Construction**, Capt. Robert Lytle, DC USN, Camp Lejeune.
- Other table clinics will be announced later.

# General News



## Board Issues 63 Licenses

The N. C. State Board of Dental Examiners announced on July 17 that it had issued licenses to 63 dentists and 18 hygienists as a result of examinations given the last week in June.

The Board elected Dr. S. L. Bobbitt of Raleigh President for the coming year and re-named Dr. J. Homer Guion of Charlotte Secretary-Treasurer for another term. Dr. Guion was also elected a Delegate to the 1961 N.C.D.S. House of Delegates, along with Dr. Wade H. Breeland of Belmont.

Those licensed to practice dentistry were: O. H. Brown, Winterville; E. E. Lumpkin, Jr., Winston-Salem; G. H. Thomas, Asheville; T. B. Cornell, Avon Park, Fla.; J. L. Thompson, Jr., Dobson; D. G. Cheek, New York City; E. F. Harris, Charlotte; B. H. Hawkins, Mars Hill; C. L. Griffith, Burnsville; J. B. Roberson, Candler; J. B. Graham, Boone; W. D. Wilson, Gastonia; L. Landau, II, Greensboro; G. C. Moser, Chapel Hill; D. H. Freshwater, Chapel Hill; R. M. Ransom, Jr., Hartford, Conn.; R. W. Addison, Durham; H. E. Hatcher, Morrisville; E. C. Deibler, Sanford; K. H. Oakley, Jr., Raleigh; Fabian Morgan, Goldsboro; W. W. Black-

man, Smithfield; R. N. Hines, Jr., Edenton; D. C. Griffin, Reidsville; Frank Heinsohn, Jr., Charleston, S. C.; H. W. Shoulars, Jr., Rich Square; J. L. Irvin, Chapel Hill; M. G. Delbridge, Goldsboro; R. A. McKee, Mooresville; W. L. Woodward, Jr., Garner; R. M. Kriegsman, Greensboro; C. W. Hoover, Winston-Salem; V. McK. Morrison, Raleigh; K. L. Bentley, Moravian Falls; P. S. Sanders, Four Oaks; L. T. Sherrill, Jr., Concord; R. L. Farmer, Greensboro; C. W. Surles, Jr., Chapel Hill; W. A. White, Warrenton; W. DeV. Maulsby, Chapel Hill; J. T. Wall, Lilesville; F. H. Howdy, Washington; W. P. Tally, Chapel Hill; T. C. Hesmer, Jr., Chapel Hill; J. R. Smith, Whiteville; C. J. Schlapkohl, Jr., Pompano Beach, Fla.; T. V. Holt, Williamston; R. W. Holmes, Lexington; E. N. Pridgen, Fayetteville; J. F. Lemler, Durham; G. C. Webb, Atlanta, Ga.; T. A. Morris, Sylva; S. W. Thompson, III, Morehead City; E. E. White, Jr., Durham; R. W. Whitson, Winston-Salem; G. I. Miller, Webster; C. M. Johnson, Benson; A. G. Ray, Chapel Hill; C. R. Wilson, Laurinburg; E. R. Oglesby, Fort Belvoir, Va.; J. R. Oliver, Jr., Winston-Salem; S. R. McKinney, Memphis, Tenn.; R. McD. Diggs, Charleston, S. C.

The dental hygienists licensed included: Jackelyn M. Kelly, Kinston; Alleyne G. Boyette, Chapel Hill; Carol S. Dent, Reidsville; Barbara S. Smith, Albemarle; Barbara R. Milone, Effingham, Ill.; Dandridge D. Bailey, Lenoir; Laura E. Overcash, Concord; Jacqueline R. Riggsbee, Carrboro; Nancy Jo Traylor, Southern Pines; Judith A. Harward, Chapel Hill; Virginia S. Watson, Winston-Salem; Barbara J. Lail, Icard; Joyce C. Carter, Charlotte; Wanda R. Ware, Burlington; Shirley Ann Jordan, Asheville; Margaret J. Parker, Charlotte; Sandra L. Finch, Chapel Hill; Enola B. Best, Fayetteville.

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## **Society Files Motion To Dismiss**

No new developments have occurred in the suit of Dr. Reginald A. Hawkins, Negro dentist of Charlotte, against the North Carolina and Second District Dental Societies.

On March 30, Dr. Hawkins filed a complaint in the United States District Court in Charlotte seeking an injunction "forever restraining defendants from excluding plaintiff from full and equal participation in defendant societies' membership because of race."

He charged that he and "others similarly situated" were being excluded from membership because of their race in violation of the 15th Amendment in that they were unable to participate in the election of members of the North Carolina State Board of Dental Examiners.

On May 20, legal counsel for the Societies filed an answer to the complaint challenging the jurisdiction of the federal courts in the matter and requesting that the suit be dismissed.

The motion to dismiss stated that the complaint failed to state a claim upon which relief could be granted. If the general statutes which govern the election of the State Board of Dental Examiners are unconstitutional, as Dr. Hawkins asserts, the motion declared, then he must seek relief from the state and not from the societies.

Dr. Hawkins had also charged that he had been denied the right to practice in Charlotte Memorial Hospital solely because he was not a member of the society. In such a case, the societies maintained that Dr. Hawkins' complaint should be with the particular institution and not with the societies.

According to R. C. Howison, Jr., attorney for the societies, a hearing on the case is expected to take place sometime between September 5 and September 17. Federal Court Judge Wilson Warlick of Newton will hear the case.

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## **Laboratories Want License**

The North Carolina Dental Laboratory Association has indicated that it will seek legislation at the 1961 session of the North Carolina General Assembly to license dental laboratory technicians.

The proposed legislation would establish a seven-man State Board of Dental Laboratory Examiners to be appointed by the Governor. The Board would consist of two dentists, four licensed Dental Laboratory Technicians, who are members of the North Carolina Dental Laboratory Association, and one member selected from the public-at-large. The Board would have the power to examine applicants and issue licenses in Dental Technology. Pro-



vision would be made to license without examination persons who have already demonstrated "satisfactory evidence that they are engaged in the trade or business of a Laboratory Technician" under a "Grandfather" clause.

Also, it is proposed that a person must serve a three-year apprenticeship directly under the supervision of a licensed Dental Laboratory Technician before receiving a license to practice as a dental laboratory technician or to operate a dental laboratory.

Currently there are 71 dental laboratories operating in North Carolina and 44 of them are members of the North Carolina Dental Laboratory Association. Officers of the Association expect to enroll as members at least 90 per cent of all dental laboratories in North Carolina before this fall.

## **Dental Technicians Program Proposed**

The Durham City School Board is expected to approve the establishment of a two-year training program for dental laboratory technicians on a post-high school level at the Industrial Education Center in Durham. However, the North Carolina Dental Laboratory Association, through its attorney, W. J. Brogden, Jr., of Durham has protested the contemplated program.

Last May the N.C.D.S. House of Delegates endorsed the program designed to virtually relieve the laboratories of the expensive and time-consuming burden of training young men on-the-job by furnishing a source of well-trained dental technicians. The laboratory Association contends that there is no shortage of qualified laboratory technicians in

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## **UNC Dental Graduates Hear Dr. Clark**

"You really have two choices as you move from the classroom and clinic into the private practice situation" Dr. Henry T. Clark told the graduates of Dentistry and Dental Hygiene at special ceremonies in Chapel Hill June 6.

"On the one hand, you can consider your dental office your castle, a spot in which you can render a distinct service to a limited clientele, a source of a satisfactory financial return which will bring you many of the material benefits of this life. Or, on the other hand, you can consider your dental office as merely a springboard from which you will play a dynamic leadership role in many areas of community life.

"I hope most of you will make the second choice . . . for the only really happy people are those who have forgotten their own problems and selfishness in the exciting role of serving others," he concluded.

Dr. Clark is the Administrator, Division of Health Affairs, University of North Carolina.

Forty-three D.D.S. degrees and 14 certificates in Dental Hygiene were awarded by the UNC School of Dentistry.

Townsend Van Holt of Williamston, a member of the graduating class, was awarded \$100 and a plaque by the American College of Dentists for his winning essay "Why I Want to Be a Dentist."

the state nor will there be any such shortage.

N.C.D.S. President Luther H. Butler has termed the proposed course "a giant step in elevating the standard of dentistry in North Carolina."

"In the foreseeable future," Dr. Butler continued, "it does not appear possible that the UNC School of Dentistry will be able to produce enough dentists to adequately meet the demand for dental care of a rapidly and constantly increasing population. Therefore, the training of well-qualified auxiliary personnel seems to be the logical and practical solution, and this of course includes dental laboratory technicians, as well as dental hygienists and assistants."

An advisory committee has been appointed to represent the Society in setting up the curriculum and standards for the program. Dr. John C. Brauer is Chairman of the committee and serving with him are: Drs. S. L. Bobbitt, Norman F. Ross and David P. Dobson.

The State Department of Public Instruction and the Durham City Schools have indicated that space will be made available in the expanding Industrial Education Center in Durham and the target date for the first class is September 1961.

The program will be based on the exacting requirements of the ADA Council on Education and the National Association of Dental Laboratories. Applicants for the school will be carefully screened so that only high type individuals with potential talent for dental laboratory work will be accepted. It is contemplated that the two-year course will be limited initially to male residents of North Carolina who are high school graduates and the class size will be

from 15-20 students per year. The program will be supported by federal, state and local funds. No tuition charge will be made but a student will be expected to bear the cost of books and laboratory supplies.

It will constitute the first non-commercial dental technician school in the entire South.

---

## **Fluoridation Study Planned in Charlotte**

About 2,500 Charlotte school children will be used in a fluoridation study which is expected to begin with the opening of school in September. Dr. Louis F. Szwejdja, new dental health officer, said he expects the study to show:

1. There is less dental decay in the Charlotte group that has been drinking fluoridated water.
2. There are no harmful effects, either dental or medical, caused by fluoride in the water supply.

The survey, involving two groups of children, is the first in Charlotte since 1956 and the second since the program was started in 1949.

For the second survey Dr. Szwejdja said one group for the survey will consist of children who have lived in Charlotte all their lives. They will be from the elementary grades. Their amount of tooth decay will be compared with another group of Mecklenburg children who have not been drinking fluoridated water.

The 1956 survey revealed that 41 per cent more white children and 40 per cent more Negro children were free from tooth decay in Charlotte than in an area where the fluoride content was negligible.

Dr. Szwejda said he hopes results of the survey will be available by the first of the year.

---

## **Dr. Hughes Named Assistant Director**

Dr. John T. Hughes of Pittsboro was named Assistant Director of the Division of Oral Hygiene of the N. C. State Board of Health July 1.

Dr. Hughes is a graduate of Wake Forest College and received his D.D.S. Degree from Baltimore College of Dental Surgery, University of Maryland. He was engaged in private practice in Pittsboro until 1953 when he joined the staff of the Division of Oral Hygiene. Since the fall of 1957 he has been engaged in graduate study at the University of North Carolina where he earned his Masters Degree in Public Health Dentistry and completed his work for a doctorate in Dental Epidemiology.

---

## **Dental Benefits To Federal Workers**

Although definite figures are not in K. G. Beeston, Director of Professional and Government Relations for the Hospital Savings Association in Chapel Hill estimates that 60 per cent of the Federal Employees in North Carolina and their dependents have chosen Blue Cross-Blue Shield type coverage under the new set-up allowing Federal Employees health insurance on the payroll deduction basis with a government contribution.

Mr. Beeston points out, however, that under this plan, no hospital care is provided for any dental services or processes including care of the teeth, dental structures, alveolar processes, dental caries, extractions,

corrections of impactions, gingivitis, orthodontia and prostheses.

Hospital services are provided for oral surgery which includes the following: fractures of facial bones; excisions of mandible joints; mandible lesions of the mouth, lip or tongue; incision of accessory sinuses, mouth, salivary glands or ducts; dislocations of the jaw; and plastic reconstruction or repair of the mouth or lips necessary to correct accidental injuries occurring while subscriber is covered under this contract.

As far as professional care is concerned, benefits are payable regardless of whether the patient is hospitalized for limited services performed by a doctor of dental surgery.

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## **Oral Surgical Endorsement Offered**

The Hospital Savings Association of Chapel Hill is now offering an Oral Surgical Endorsement to its subscribers in addition to the benefits of basic Blue Cross and Blue Shield certificates for a small extra monthly fee.

The dental surgical coverage under the endorsement pays for specified procedures performed by a dentist, for the removal of impacted teeth and for x-rays for traumatic injury. Benefits are provided for procedures performed in the hospital, the dentist's office or at home.

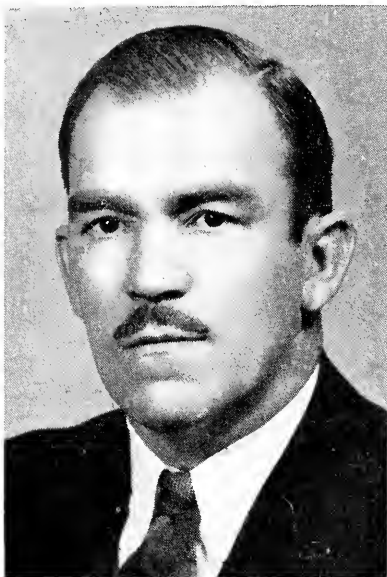
Dental services not covered under the endorsement include the extraction of teeth, other than impacted teeth, fillings, bridges, false teeth, crowns and any other dental services not listed in the schedule of allowances.

Literature describing the Oral Surgical Endorsement for placement

in individual dentist's offices may be secured by writing the N.C.D.S. Central Office in Raleigh.

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## **Dr. Plaster Receives Red Cross Award**



Dr. Hubert S. Plaster of Shelby has been presented a Red Cross certificate of appreciation for his 25 years' volunteer work with the Red Cross National Aquatic School in Brevard.

He was also selected as a volunteer field consultant in water safety in Cleveland County and surrounding Western Carolina counties. He will assist chapters with programs in this area.

Dr. Plaster was selected to the position by the area Red Cross office in Atlanta, Georgia.

He was a student at the national aquatic school during the 1933-35 seasons and has been a member of the faculty since the 1936 season

as an instructor in boating and water season.

According to Red Cross officials, only three others in the nation have received similar awards.

---

## **Dental Category Requested**

Senator Lister Hill, at the request of the American Dental Association, has introduced a bill (s. 3780) to establish a dental category in the program of federal grants-in-aid to states for general health activities.

On June 29 Senator Hill told members of the U. S. Senate, "For more than 40 years, the grant-in-aid principle has been used to assist State and local governments in . . . raising standards of health care. Federal funds earmarked for specific areas such as heart disease cancer, tuberculosis, maternal and child health, have served as a potent stimulus to the development of extremely effective programs. Similar results can be achieved in the area of dental diseases by enactment of the bill I have introduced."

A hearing on the bill is expected early in 1961.

The A.D.A. urges that state dental societies endorse the proposed legislation, adopt resolutions specifying the new programs that are needed in their states and existing programs which should be expanded, and seek appropriate funds from state legislatures to carry out these programs effectively.

Evidence that efforts have been made to obtain support from state legislatures will greatly strengthen the Association's position in behalf of this legislation, according to Floyd W. Pillars, Chairman, ADA Council on Legislation.

## Clinicians for 1961 Meeting Announced

Three nationally recognized clinicians will be on the program of the 105th Annual Session of the North Carolina Dental Society, May 14-17, 1961, at Pinehurst, according to a recent announcement by Program Chairman Charles H. Teague of Greensboro. They are Ralph W. Phillips, Professor and Chairman of the Department of Dental Materials at Indiana University School of Dentistry, Dr. Miles R. Markely of Denver, Colorado, and Dr. Walter T. Colquitt of Shreveport, Louisiana.

"These three, eminently qualified essayists will form the nucleus of one of the finest scientific programs possible," Dr. Teague said, "and the Committee feels fortunate in being able to bring them to North Carolina."

The exact titles of their essays will be announced at a later date, but Dr. Teague indicated that Mr. Phillips will speak on dental materials, Dr. Markely on amalgams and Dr. Colquitt on crown and bridge.

Mr. Phillips lectured on dental materials at the 1955 meeting of the Society. This will mark the first appearance of Dr. Colquitt and Dr. Markely on an N.C.D.S. program.

---

## Governor's Conference On Aging

Six recommendations for improving dental care for the aging were made at the North Carolina Governor's Conference on Aging held at Raleigh July 27-29.

These recommendations were submitted by Dr. Riley E. Spoon, Jr., representing the North Carolina Dental Society as a member of the Committee on Health and Medical Care, one of the eight major divisions of the conference. They were:

1. That the North Carolina Dental Society, the University of North Carolina, and the Dental School Faculty continue in their efforts to obtain additional appropriations from the North Carolina Legislature. Such appropriations would enlarge the number of dental graduates and auxiliary personnel.

2. The state-wide survey proposed by the U.N.C. School of Public Health, assisted by the Division of Oral Hygiene of the N. C. State Board of Health, should be activated as soon as it is possible. Only through

such a survey can data be obtained upon which to base recommendations for effective dental care of the aged.

3. That more hospitals consider the installation of dental equipment and the organization of a dental staff to make it possible that dental health, in relationship to general health, may receive its proper consideration.

4. As soon as practical the dental insurance program should be revised to include more of the dental problems that would relate to the age group 65 and over.

5. All programs directly related to the training of the dental student and dental auxiliary personnel be given top priority.

6. That consideration be given the employment of dentists especially trained in geriatric dentistry under the Division of Oral Hygiene of the N. C. State Board of Health.

Dr. Spoon pointed out that funds had been appropriated for the state-wide epidemiology survey and it would get underway September 1.

Also, he noted that a training program for dental laboratory technicians at the Industrial Center at Durham would probably be in operation by September 1961.

The three-day conference was sponsored by the North Carolina Governor's Coordinating Committee on Aging for the purpose of making recommendations for future action both within North Carolina and to the Federal Government through its 1961 White House Conference on Aging.

Representing the North Carolina Dental Society at the conference in Raleigh besides Dr. Spoon were: Dr. H. Royster Chamblee of Raleigh, Dr. Dennis S. Cook of Lenoir and Executive Secretary Andrew M. Cunningham.

---

## **The Marks Safe In Rhodesia**

Dr. and Mrs. Sandy Marks and their daughter Katie were safe at Salisbury in Southern Rhodesia after a thrilling evacuation from Lubondai in the Congo, according to a letter written by Dr. Marks on July 23. It read in part as follows:

"We are refugees; we have been evacuated from Lubondai since July 11, and all along the way we've been conscious of our Lord's love and guidance.

"This time last month we were concerned with many things that we could see no answer for—this month we know why! It has been quite a time—slept one night on the ground at the Luluabourg Airport—no cover, no food, no water. It was a joy and blessing to be in need and have that need met the next day by the Luluabourg Christians who came to us bringing water and bananas—that was thrilling. From there we

were carried by U.S.A. planes to Kamina Military Base; stayed there for two days, then flew in a U.S.A. Globe Master to Salisbury, from whence we write to you.

"Wish this could bring you definite plans, but we haven't yet gotten to that point—it is still day-by-day. It is pretty certain that Kitty and Katie will have to return to U.S.A. because of Katie's schooling. We think Richmond will be our location provided we can find some place to live . . . Sandy wants to return to Congo as soon as possible in order to get the dental 'interns' installed and working and to help in any other way he can. Kitty and Katie hope to remain here until he leaves for Congo. We figure that we should leave here by August 15, in order to get 'situated' before school begins.

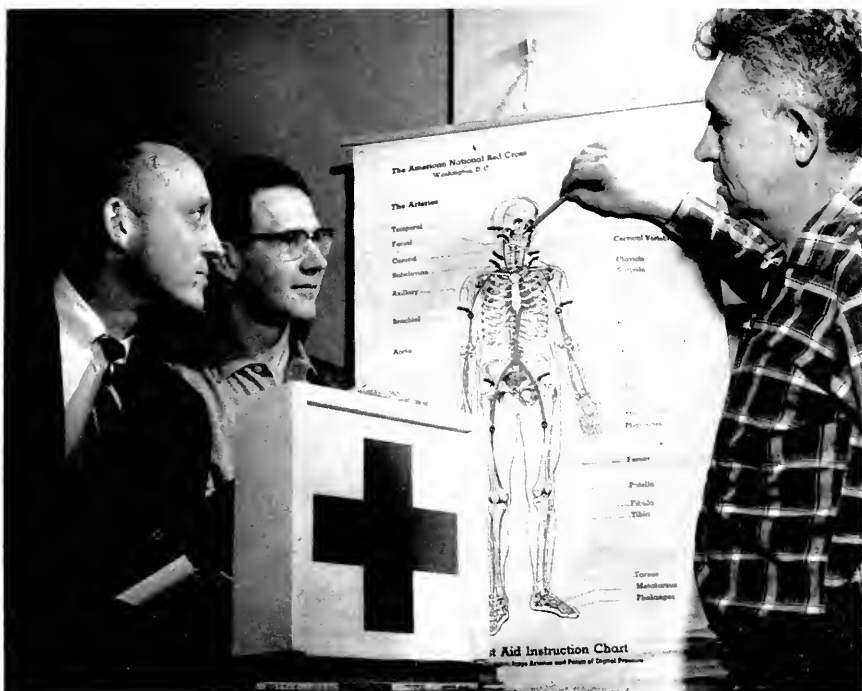
"The situation here in Rhodesia is not good. The army has been called out; soldiers are everywhere—yesterday tanks were lined up in our block. Writing this, Matthew 24:6 comes to mind; as people and as nations, we try everything but the one thing that will work—why?"

Dr. Marks practiced in Wilmington until 1948 when he went to the Congo as a dental missionary of the Presbyterian Church where he cared for the dental needs of the Presbyterian missionaries and established a school to train Congolese in dentistry.

---

## **Take Membership Cards To Session**

All dentists planning to attend ADA's annual session Oct. 17-20 in Los Angeles should be sure to take their 1960 membership cards. The cards are essential for registration and are needed for admittance to the scientific programs.



Red Cross first aid instructor Wilford G. Jones (right) shows two Forsyth County Dentists where to apply pressure to stop bleeding from open wounds. The dentist-students (left to right) Dr. J. Harry Spillman of Winston-Salem and C. Robert Helsabeck of King were two of the twenty-three Forsyth County dentists who recently completed an advanced course in first aid to better prepare themselves to administer emergency medical care should disaster strike.

## 23 DENTISTS COMPLETE FIRST AID COURSE

Twenty-three Forsyth County Dentists have completed the Advanced First Aid Course of the American Red Cross.

Dr. Hylton K. Crofts, last year's Chairman of the N.C.D.S. Committee on Military Affairs and Civil Defense, instigated the course, so that in the event of local or national emergency, dentists would be better prepared to fulfill their role of allied medical personnel to assist physicians in the care of the injured.

The course concentrated on first aid skills such as bleeding control,

artificial respiration, transportation of the injured, bandaging and splinting. The dentists already know a great deal of the theory behind first aid, but as Dr. Crofts put it "We simply wanted to brush up on our technique."

Dr. Crofts indicated that this course was a pilot endeavor and that he hoped that it would create interest in such courses among dentists throughout the state.

"If interest is sufficient," he added, "we hope to offer courses in the effects of nuclear weapons,

radiation sickness, intravenous therapy, contamination of food and water and training in emergency receiving hospitals."

Successfully completing the first aid course were: F. C. Beavers, John R. Williams, O. J. Freund, T. L. Blair, Hylton K. Crotts, Robert T. Byerly, Thomas A. Smith, J. Harry Spillman, Riley E. Spoon, Jr., K. H. Meadows, Charles M. Westrick, William G. Ware, Jr., W. Grant Lynch, John S. Long, Guy M. Phillips, R. Philip Melvin, David R. Hinkle, Herman C. Jent, Edgar H. Reich, Gilbert W. Yokely and Dwight A. Jackson, all of Winston-Salem; and Everett A. Eckerd of Mocksville and C. Robert Helsabeck of King.

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## **ADA and AHA Co-Sponsor Special Session for Dentists**

This year, for the first time, a program for dentists will be included in the American Heart Association's annual Scientific Sessions. Sponsored jointly with the American Dental Association, it will be held Friday, October 21, from 2 to 5 p.m., in the Kiel Auditorium, St. Louis.

Tar Heel dentists are warmly invited to attend the special session, which will be chaired by Dr. Francis L. Chamberlain, Clinical Professor of Medicine at the University of California Medical School with Dr. J. Paul Guidry, dentist of St. Louis, as co-chairman.

Registration forms may be secured in advance from the North Carolina Heart Association, Miller Hall, Chapel Hill; or dentists may register at Kiel Auditorium on October 21 from 8:30 a.m. to 2 p.m.

The program will take the form

of a symposium on Management of Medical-Dental Problems in patients with Cardiovascular Diseases. Among the speakers will be Roy W. Osterkamp, D.D.S., St. Louis, on "The Nature of Restorative, Periodontal, and Oral Surgical Dental Services;" I. B. Bender, D.D.S., Associate Professor of the University of Pennsylvania Dental School on "Incidence of Transient Bacteremias Following Dental Manipulative Procedures;" and Dr. Robert S. Pressman, Associate in Medicine, Albert Einstein Medical Center on "Prophylactic Use of Antibiotics in Patients Who Require Dental Manipulative Procedures."

Other speakers will deal with the use of local anesthetics during dental procedures in patients who are receiving anticoagulant, antihypertensive, and diuretic drugs for treatment of cardiovascular conditions. Brune Kwapis, D.D.S., St. Louis University Dental School, will discuss the subject from the dental point of view, while the pharmacological and medical considerations will be presented respectively by Stanley C. Harris, Ph.D., Professor of Physiology and Pharmacology, Northwestern University, and by Dr. Chamberlain.

Dentists will have the opportunity to attend the three-day scientific sessions of the Heart Association, which will run through October 23, and to see the industrial and scientific exhibits to be displayed, if they wish.

---

## **Films on Radiation Available**

Two new films on radiation are available on a loan basis to local societies and study groups.

"Dental X-ray Equipment: Alternations For Modern Radiation," a



color film with a running time of approximately 18 minutes and designed specifically for dentists has been made available by the Department of Health, Education and Welfare, according to Dr. Harry W. Bruce, Jr., Chief of Dental Public Health Services in Charlottesville, Va. Arrangements for securing this film should be made through Dr. E. A. Pearson, Jr., Director, Division of Oral Hygiene, N. C. State Board of Health, Raleigh, N. C.

"Radiation: Physician and Patient — the Control of Radiation Exposure in Diagnostic Radiology" may be secured by writing Dr. W. L. Wilson, Chief, Occupational Health Section, N. C. State Board of Health, Raleigh, N. C.

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### **Dental Assistant Film Made at Carolina**

The School of Dentistry at UNC is the subject of a United States Public Health Service film on the training and work of dental assistants.

The film entitled "The Dental Assistant, a Career Woman" will be used in a nation-wide recruiting program among junior and senior high school girls by the U. S. Public Health Division of Dental Resources in cooperation with the American Dental Assistants Association.

The University of North Carolina was chosen as the site for the film because of the research in progress there in the training of dental assistants.

---

### **Elizabeth City to Fluoridate Water**

The Public Utilities Commission in Elizabeth City has ordered the

purchase of necessary equipment for fluoridating the city's water supply.

The proposal to inject fluorides in the public water supply of Pasquotank County's seat has been under consideration for sometime. An open meeting was held by the Public Utilities Commission in order to give dissenters a chance to express themselves. These objections, which were few in number, were taken under advisement by the Commission along with recommendations favoring the action provided by a large number of local people, including physicians, dentists and the State Board of Health.

The Commission at a meeting July 5 instructed its Superintendent to get the equipment which would provide the city water with the optimum amount of fluoride as recommended by the State Board of Health.

---

### **Epidemiology Survey Underway in N. C.**

The research study, *Natural History of Dental Diseases in North Carolina* is underway, Dr. E. A. Pearson, Jr., Director of the Division of Oral Hygiene of the North Carolina State Board of Health has announced. The Division of Oral Hygiene and the Department of Epidemiology of the University of North Carolina, who are jointly sponsoring the study, report that a stratified, random sample of households within the state has been selected. This sample consists of approximately 2,000 households in 90 of the 100 counties in North Carolina.

Dr. John T. Fulton, Professor of Dental Epidemiology at UNC's School of Public Health, Dr. J. T.

Hughes, Assistant Director of the Division of Oral Hygiene and Dr. Pearson have visited local health departments throughout the state to enlist their support in making the initial contacts with the sampled households.

Local and state public health dentists attended a seminar at the UNC School of Public Health in Chapel Hill from August 15 through August 26 and received specialized training

in methods and techniques of collecting data for the study.

Participating public health dentists were to begin visiting the selected households about September 1. These visits, Dr. Pearson explained, are to be coordinated with routine assignments and are an extension of the regular duties of the public health dentists. It is estimated that the field work will require about 18 months for completion.

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## Obituaries

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**Dr. Benjamin Jasper Durham**, 80, of Southern Pines, an ADA Life Member of the Third District, died June 4, 1960.

**Dr. Ellis L. Edwards**, 70, of Morganton, a Retired Member of the First District, died April 24, 1960.

**Dr. Linus Matthew Edwards**, 79, of Durham, a Past President of the North Carolina Dental Society and

a State Life Member of the Third District, died February 25, 1960.

**Dr. David K. Lockhart**, 83, of Durham, an ADA Life Member of the Third District, died July 19, 1960.

**Dr. Franklin Pierce Pratt**, 43, of Salisbury, a member of the Second District, died March 3, 1960.

**Dr. Lee Roy Thompson**, 58, of Winston-Salem, a State Life Member of the Second District, died January 11, 1960.

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THE *Journal*  
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JANUARY, 1961



VOL. 44, NO. 2

*Mid-winter Issue*

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# **The Journal of the North Carolina Dental Society Sincerely Dedicates This Issue to the Memory of**



ALEXANDER TUNNELL JENNETTE, D.D.S.

1905 - 1960

For thirty-three years "Sandy" practiced dentistry in Washington, North Carolina where he was born October 11, 1905. He was graduated from the Baltimore College of Dental Surgery in 1927 and was married to the former Mary McLean on October 24, 1931. During World War II he served as Dental Surgeon with the 30th Infantry Division, received six battle stars in the European Campaign and was awarded the Croix de Guerre by the French Government.

He was an Elder in the First Presbyterian Church of Washington and a member of the City Council. For ten years he was a member of the North Carolina State Board of Dental Examiners.

He was beloved by his friends and respected by his profession. In his passing on October 9, 1960, dentistry suffered an irreparable loss.



DR. BUTLER

# The President's Page



We are undergoing a series of changes which will affect dentistry as an organization and the dentist as an individual. Let us be determined that these changes will not lower the high standards set by our predecessors.

One of the big changes is that the House of Delegates which met in special session in December and the Executive Committee have requested the Legislative Committee to seek such legislation as may be necessary in order that North Carolina may participate in a program of medical and dental care for the aged. Since Congress has already enacted the legislation last September and the Medical Society of the State of North Carolina has elected to participate, it would seem that dentistry has no alternative but to support the most practical plan for the implementation of the program in our state. It was the unanimous opinion of the Executive Committee and the House of Delegates that this is a form of socialized dentistry and as such was objectionable.

You will definitely hear more about Public Law 86-778 (Kerr-Mills Bill) which, briefly, is designed to take care of the medical needs of a special group 65 years of age and over and who are not already recipients of Old Age Assistance. We have approximately 300,000 in this age group in North Carolina, 80 per cent of whom are eligible for this particular assistance.

This is another one of the times when we should examine our hearts and consciences in reference to the real need of the recipients of these services against the possibility of the many pitfalls that may be encountered within this program.

While attending the A.D.A. meeting in Los Angeles, I visited the Prosthetic School operating under the auspices of the University of Los Angeles. It was gratifying to have direct statements from two North Carolinians, Mr. David Terry (son-in-law of the late Dr. A. C. Current, Sr.) and Mr. Robert Johnson of Hickory. As students they have nothing but high praise for such a program. We should render all assistance and support possible to make the proposed laboratory technician's training program in Durham a reality .

LUTHER H. BUTLER, D.D.S.

GREENSBORO  
DECEMBER 13, 1960



DR. ROSS

## *The President-Elect Speaks*

There were many interesting and controversial subjects considered by the House of Delegates at the 101st Annual A.D.A. Meeting in Los Angeles, October 17-20.

At the first Monday meeting of the House, Speaker Gerald Timmons assigned the reports and resolutions to the several reference committees, where each report would be given ample discussion. These committees were in session throughout Tuesday. They are open to any A.D.A. member for any expression pertinent to that committee.

Voting occurs Wednesday and Thursday on all required issues. Voice votes suffice for most matters (Dr. Timmons can get a thunderous response when he asks for it), a few standing votes are counted, and the voting machines were used once on a very close and controversial issue—Las Vegas as a meeting place in 1965. There was great opposition to that choice, but the vote carried. Some of us still hope that decision will be changed, but the hard facts are that there are few cities able and willing to handle such large meetings at the favored time of the year.

The Crest announcement was very controversial, and much debated before, during, and after the meeting. However, the votes on that and allied subjects were not close, being strong votes of confidence for the Council of Dental Research and Therapeutics. This strong committee was headed by North Carolina Dental Society's old friend Dr. Lester Burket. He pointed out that many proprietary preparations (i.e. Seconal, Achromycin, etc.) have been approved in the past without excitement. He also told us that the Proctor and Gamble research had been long and costly in preparing the all important formulation of such a product with its effectiveness and necessary shelf life. Nevertheless, we think more care and study will go into future releases of a similar nature. A Texas resolution requiring endorsement of any proprietary preparation to have Board of Trustee and House of Delegate approval was rejected.

Reference committee hearings on dental laboratory problems indicated that the experiences in our state are similar to others, and strengthened our thinking that our efforts are in the right direction.

NORMAN F. ROSS, D.D.S.

DURHAM

DECEMBER 13, 1960





DR. TOWLER



## *From the Secretary's Desk*

It was a privilege to attend all five district meetings this past fall. Although entertainment and moments of relaxation were well-planned, it was very apparent that these were not the chief purposes of district meetings. Each of the districts were vitally interested in the progress and expansion of the dental profession.

A total of forty-six new members were received by the districts during the fall meetings. We want them to know that we are happy to have them and that we would welcome an opportunity to discuss any problems with them at any time.

On October 16 the results of the most extensive survey ever made of dentistry in the United States was released. Four pertinent facts were brought out by the survey.

1. The American people place a low priority on dental care.
2. Even though our nation is wealthy, some of our people can not pay for the desired minimum dental care.
3. There is a need for more dentists to adequately care for an expanding population.
4. More use of auxiliary personnel in the dental office must be made.

The survey pointed out that the dental care for children alone would cost \$120 million the first year and would level off to an annual expenditure of \$94 million within twelve years.

The survey was conducted by the American Council on Education and was financed by grants from the Kellogg Foundation, the Rockefeller Brothers Fund and the Louis W. and Maud Hill Family Foundation.

S. BYRON TOWLER, D.D.S.

RALEIGH  
DECEMBER 13, 1960

# **Editorial**

## SERVICES

## UNLIMITED

Our recent dealings with the North Carolina Dental Laboratory Association are helping to bring into clearer focus a very vital problem confronting dentistry, and that is "How can we fully utilize our auxiliary personnel?" There is probably not a single dentist in the state that is operating at his optimum level, for, according to several surveys, a dentist is operating only at his optimum when he has at least two operatories (and preferably three) two well-trained assistants, a dental hygienist, a combination receptionist and bookkeeper, and an alert, capable and progressive laboratory at his disposal.

You can almost hear the reaction to this idea, and that is "Well, that may be all right for some men, but it wouldn't work for me." This may be partially true, but let's review some facts that are going to force us into the position of more adequately utilizing auxiliary personnel:

1. Each year the Federal Government is parading a segment of our population that is receiving inadequate medical and dental care

before our lawmakers. That which is being done is ignored. It is true that no one segment of our population should suffer from lack of health services. Complete control is not the cure, however.

2. The State is in the health business along with the Federal Government, only more so in some respects. Health dollars in the hands of school superintendents and principals present an example of what politics will do.

3. Approximately two dental schools were void of freshmen in their classes last year. The overall caliber of applicants is declining. If the present ratio of dentists per 1,000 people is maintained for the next ten years, it will necessitate the opening of two additional dental schools per year.

The facts presented are real, hard, and cruel. How can we fight the Federal and State Governments? In a democracy you cannot force more students to study dentistry. Another ugly fact is that there are only two alternatives, and they are (1) more statism, and eventually complete socialism; or, (2)

increased productivity, promotion of fluoridation, and the recruitment of more dental students.

Let us concentrate upon increased productivity, for that will provide the most immediate relief from the existing situation. Dr. John Anderson says "Don't work harder, work smarter!" This should be the slogan for every dentist in our state. We can "work smarter" by having more and better trained auxiliary personnel. For many of us it will be necessary to study new ways for our assistants to help us. Evaluate every working procedure. Let's help organize local dental assistant societies. Help plan their programs. The North Carolina Dental Society could prove itself invaluable if it were to develop a program whereby every local dental society, and their corresponding dental assistant society, were presented programs and educational material on how to become more efficient and increase productivity. This type of program is most effectively carried out at the local level.

The role of the dental hygienist should be studied. Do we dentists know how to use one? It is a com-

mon complaint among dentists that they are unable to obtain a hygienist. Why? Perhaps our State Society should make a study of this situation and come up with some recommendations. The hygienist is invaluable in increasing productivity.

Our dental laboratories should be encouraged, educated to our needs, and helped in every way. The proposed laboratory technician's training school in Durham should enable each one of our good dental laboratories to become better. Education and income rise and fall, hand in hand. As we dentists become more proficient in time and technique; as our assistants and hygienists become more efficient in their skills, so must our laboratories keep abreast of these changing times to complete the cycle of increased productivity.

Dentists, as a whole, are overworked. The fact remains, however, that we must produce more work. The dentists cannot work much harder. There is only one answer — additional productivity can result only from more and better trained auxiliary personnel. C.C.D.

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DISTRICT MEETINGS—FALL 1961

- First District**.....September 30-October 2, Grove Park Inn, Asheville  
**Second District**.....September 24-25, Robert E. Lee Hotel, Winston-Salem  
**Third District**.....October 29-30, Mid-Pines Club, Southern Pines  
**Fourth District**.....September 18-19, Sir Walter Hotel, Raleigh  
**Fifth District**.....September 17-18, Country Club, Greenville

# **Informal Comments on**

## **THE DISTRICT MEETINGS—1960**

BY THE DISTRICT EDITORS

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### **The First at Grove Park**

Excellent clinicians, wonderful food, luxurious surroundings and an air of relaxation and fellowship seemed to be "air-blended" into a very successful First District meeting at Grove Park Inn, Asheville, October 1-3. All events were scheduled to avoid a rush. Our ladies were thrilled by a tour of Asheville homes and a hat show.

Festivities began with a Harvest Feast and Cabaret Party Saturday night. The mood of the meeting was definitely established here. Singing, gaiety, eating, refreshments of all kinds and dancing reigned supreme. One hundred and forty-one attended the Saturday night function. Sunday was a day of complete

leisure for many a weary soul, while others golfed, hiked or toured.

Following a sumptuous buffet Sunday night, the annual business session was highlighted by the induction of thirteen new members. They were: David R. Beam, USAF; Donald G. Cheek, USA; Charles L. Griffith, Forest City; Robert W. Holmes, Asheville; Thomas A. Morris, Asheville; Galen C. Moser, Hickory; Dixon Lee Qualls, USN; Joe B. Roberson, Asheville; Luby T. Sherrill, Jr., Shelby; Max L. Spurlin, Hazelwood; George H. Thomas, USN; William D. Wilson, Gastonia; John M. Archer, III, Asheville, transfer from the Second District.

Monday was all business. Drs.

F. B. Wiebusch and R. L. Simpson of the Medical College of Virginia presented timely and informative papers. Dr. Wiebusch emphasized that most periodontal disease is amenable to therapy and a cure is obtainable. Dr. Simpson effectively described why our fixed restorations fail.

Much time and effort was spent upon the preparation and presentation of the table clinics. Attendance and interest were abnormally high for each of these events, indicating much knowledge was gained. Our thanks to these men who contributed so much to bettering dentistry.

During the final business session the following officers were installed: Dennis S. Cook, President; A. T. Lockwood, President - Elect; Harold E. Plaster, Vice President; M. M. Forbes, Secretary - Treasurer; Cecil Pless, Jr., Editor; C. G. Walker, Executive Committee; John Girard, Jr., and C. Z. Candler, Jr., Delegates to N.C.D.S.

Golf prizes were awarded as follows: F. A. Buchanan, Low Gross; John Archer, Low Net; Claude Sherrill, Second Low Net; D. A. Dixon, Third Low Net; Shuford Abernethy, Consolation; R. W. Holmes, Consolation.

All officers and committees should be commended for planning and executing such an outstanding meeting. Two hundred and ninety-four registered at the meeting, and all went home happy that they had attended. Our meeting will be held at Grove Park Inn again next year. Plan now to attend! You will be glad you did!

M. M. FORBES, D.D.S., *Editor*  
First District



PARK GROVE INN, Asheville was the scene of the First District's meeting October 1-3. Pictured at the top are the officers elected for the coming year. From left to right they are: John W. Girard, Delegate; A. T. Lockwood, President-Elect; M. M. Forbes, Secretary-Treasurer; Dennis S. Cook, President; and Harold E. Plaster, Vice President. Below are two of the fine table clinics presented.



# Denture Expert and Plastic Surgeon Heard

SECOND DISTRICT OFFICERS elected for 1960-61 are shown in the top picture. They are: Lackey B. Peeler, Vice President; James A. Harrell, President; James E. Graham, Jr., Secretary-Treasurer; O. J. Freund, Editor; and L. C. Holshouser, President-Elect. In the second picture from the top, old timers John A. McClung, O. L. Joyner and M. L. Troutman had a lot to talk over. All three are charter members and were attending their 41st annual meeting. Pictured third from the top is the table clinic on "Children's Dentistry" by Carlton V. Winter and Barry G. Miller. The bottom picture shows E. U. Austin delivering the charge to the new members.

"Arrange the teeth for your next denture patient yourself. You will be amazed at how much closer your association with the patient will be," said Dr. Dayton D. Krajicek of Wadsworth, Kansas, in addressing the Second District Dental Society at Winston-Salem on September 26, 1960.

"The patient will be tremendously impressed with the added personal attention. Patients are getting smarter — they know that dentures don't have to look like false teeth. Arrange teeth in a smile line," Dr. Krajicek urged.

"What we strive for is the *cure*, and not palliative treatment when dealing with oral and intra-oral malignancies," stressed Julius A. Howell, M.D. of Winston-Salem, in his address to the dentists.

"Because cancers usually do not cause pain," said Dr. Howell, "is the reason people are lax about having a lump or open lesion checked."

One hundred and ninety - five members and guests enjoyed a social hour, banquet and entertainment by Mr. Bob Clodfelter of Winston-Salem who gave an hilarious dissertation on "Sneezing."

There were twelve Past Presidents present at the banquet. Three members who were attending the 40th annual meeting had also attended the first meeting. They were: John A. McClung, Winston-Salem; O. L. Joyner, Kernersville; and M. L. Troutman, Kannapolis.

"Dentistry has changed from a trade to profession in one hundred years. Let us not rely on the past. Look into the future. You have the responsibility to carry on. Sacrifice for your profession," said Dr. Ed Austin of Charlotte, as he charged the new members. "Our profession is intrusted to you. Do not betray us."

Nine new members were introduced and inducted. They were: K. R. Snyder, Winston - Salem; D. C. Evans, Charlotte; W. T. Bridges, Mooresville; J. B. Graham, Sparta; W. F. Riddle, Winston-Salem; E. F. Harris, Charlotte; K. L. Bentley, North Wilkesboro; E. B. Hopkins, Winston-Salem; and R. L. Johnson, Shelby.

The table clinics were very well presented this year. Drs. C. V. Winter and Barry Miller of Charlotte should receive special recognition for their demonstration on a child patient with a complete operating room set-up.

Officers elected for the coming year included: James A. Harrell, President; L. C. Holshouser, President-Elect; L. B. Peeler, Vice President; J. E. Graham, Jr., Secretary-Treasurer; O. J. Freund, Editor.

Many of the one hundred and sixty - five members present expressed their appreciation for having had the opportunity to attend such a very worth-while and enjoyable meeting. The officers and committees should be commended for a job well done.

O. J. FREUND, D.D.S., *Editor*

# The Third District at Sedgfield

The Third District convened at Sedgfield Inn, Greensboro, September 18 and 19, the first of the five districts to meet this year, and had the good fortune of beautiful mid-September weather and the enthusiastic attendance of 168 members and guests. Needless to say, the excellent weather lured 50 golfers onto the fairways and greens of the Sedgfield Inn Golf Course where the meeting was held — in part. Of these 50 avid sportsmen, Riley Spoon won the match, shooting a 75. Walter Moore came in second with a low gross of 80; Robert Sugg and Richard Citrini, came in third with a low net of 72. Tom Dixon, whose score set somewhat of a course record, was recognized for the comedy he provided for his foursome.

The Sunday evening session began at the Sedgfield Manor with a Social Hour followed by the banquet. During the banquet there was a drawing of door prizes generously provided by the Arrangements Committee. These coveted prizes were won by Dr. Roger Sturdevant, Dr. William Campbell, Mrs. Dwight Price, and Dr. William Hinson — some people seem to have all the luck. Entertainment was provided by Dave Morrah, Author and Humorist of Greensboro.

Following the banquet the business session was called to order by President Guy Willis. In his address to the session, Dr. Willis called attention to the Society's progress for the past year with the fluoridation

of Hillsboro's community water and the official sanction given to fluoridate the Chapel Hill water.

Of the socialistic forces threatening our profession he stated. "It seems that the threat of socialized dentistry and medicine becomes greater each year. I believe that our greatest insurance against this rising tide, which could do nothing but destroy our ideals and free enterprise, is the public itself. We must, by our actions as well as our words, continue to let everyone know that dentistry as we know it, is vastly superior to any system which sacrifices individual initiative for what appears to be guaranteed security."

The legislation as proposed by the North Carolina Dental Laboratory Association was brought up in the business session and discussed at great length. After fair and realistic evaluation of the facts as presented by Dr. Norman Ross and Dr. Luther Butler, a resolution was made that such legislation as proposed by this association was not necessary for the health, safety, and well being of the people. The resolution was unanimously approved by the Society.

Seven new members received their charge from Dr. Norman Ross. They were: Drs. John Williford of Graham; Charles Surles of Chapel Hill; Sam Gibson of High Point; John Smith, Jr. of Pinehurst; John Irvin of Chapel Hill; Lad Landau of Greensboro; and Winfred Kiser of High Point.

Newly elected officers for the



coming year are: Dr. William Hinson of High Point, President; Dr. M. L. Cherry of Durham, President-elect; Dr. T. E. Sikes of Greensboro, Vice President; and Dr. C. W. Poindexter of Greensboro, Secretary-Treasurer. Delegates to the North Carolina Dental Society are Drs. J. T. Lasley and Charles Teague.

Dr. Bill Hinson's program committee produced two very fine clinicians Dr. R. A. McEwen and Dr. Edward C. Dobbs. Dr. McEwen, who was formerly Professor of Crown and Bridge Prosthesis at Emory University School of Dentistry, discussed the use of high speed rotary instruments in the development of intra- and extra-coronal preparations. Dr. Dobbs, Professor of Pharmacology at the University of Maryland School of Dentistry, discussed the prevention and treatment of emergencies in the dental office. Dr. Marvin Walker of Durham presented a program to the Dental Auxiliary on the "Use of Hypnosis in Dentistry." Dr. Roger Sturdevant showed the film "Pattern of a Profession," which is to be viewed around the state by pre-college students. This film was produced by the ADA to demonstrate to the student the procedure and requirements necessary in obtaining the degree of Doctor of Dental Surgery.

BAXTER B. SAPP, JR., D.D.S.,  
*Editor, Third District*

THE THIRD DISTRICT held its 1960 meeting at Sedgefield Inn, Greensboro, and elected (top picture): W. P. Hinson, Jr., President; T. E. Sikes, Jr., Vice President; C. W. Poindexter, Secretary-Treasurer; and M. L. Cherry, President-Elect. Below are pictures of the new members and two of the table clinics.



## Fourth District

The Fourth District Dental Society met in Raleigh on September 26-27, 1960, at the Sir Walter Hotel, with President J. B. Powell of Clinton, presiding.

A large number of members, their wives, and guests enjoyed a social hour and banquet which was followed by a dance on Monday night. Dr. S. L. Stealey, President of the Southeastern Baptist Theological Seminary of Wake Forest, N. C., was guest speaker for the banquet.

The following new members were inducted into the Fourth District, with Dr. G. Fred Hale of Raleigh giving the charge: Wilbert Worth Blackman, Charleston, S. C.; Joseph S. Evans, Jr., Henderson; Cary Jackson Goodwin, Fayetteville; Harold M. Hartsell, Henderson; C. M. Johnson, Elizabethtown; John C. Kinlaw, Henderson; William Kenneth Morgan, Fairmont; V. M. Morrison, Raleigh; Jeffrey Chandler Pennington, East Meadow, L. I., New York; Edward N. Pridgen, Fayetteville; Jere Edward Roe, Raleigh; Phil Snead Sanders, Four Oaks; Herbert Smith, Raleigh; James Roderick Smith, Lumberton; Sanford Webb Thompson, III, Raleigh; Warden Lewis Woodard, Jr., Garner.

The new officers for the coming

year are: Drs. T. G. Collins, President; C. P. Osborne, Jr., President-Elect; Newton Smith, Vice President; L. D. Herring, Secretary-Treasurer; J. H. Ligon, Jr., Editor; Marcus R. Smith and C. W. Sanders, Delegates.

The table clinics for the meeting were most informative and interesting. The following clinics were presented: "Simplified Crown and Bridge Technique," Dr. William Heeden, Jr., Benson; "Appliance Therapy for the Correction of Cross Bites in the Mixed Dentition, Dr. Henry Zaytoun, Raleigh; "Chairside Convincing through Slide Projection," Dr. R. H. Turlington, Clinton; "Clinical Consideration of Stannous Fluoride," Dr. J. Fred Sproul, Raleigh; "Technique for Dental Transplants," Dr. Jere Roe, Raleigh; and "Emergency Cart," Dr. Cecil Lupton, Chapel Hill.

The guest speaker, Dr. José E. Medina, D.D.S., of Baltimore College of Dental Surgery, presented a most interesting lecture and discussion on the "Recent Advances in Operative Dentistry." He pointed out that high speed operation should be used as an adjunct only to the conventional instruments, and emphasized the necessity of using coolants in cutting at high speeds. It is his opinion that the optimum tur-

## Meetings in Raleigh

bine speed is 165 thousand R.P.M. He also stressed the importance of the proper amount of pressure and protective measures to be observed in operating with high speed instruments. Dr. Medina, in addition to discussing high speed, covered the subjects of materials used in operative dentistry and design of operation.

The Fourth District Auxiliary met at Ballentine's in Cameron Village with President, Mrs. Leo Horton presiding. The following officers were elected for the new year: Mrs. M. P. Nicholson, President; Mrs. Henry Zaytoun, President-Elect; Mrs. J. M. McAllister, Vice President; Mrs. J. A. Crawford, Secretary; Mrs. David Masters, Treasurer; and Mrs. Roy Gaines, Historian.

Mrs. Luke M. Kitahata, daughter of Dr. and Mrs. L. M. Massey, of Zebulon, and Miss Takako Sakai, a friend, were the guest speakers.

Mrs. Kitahata gave a beautifully illustrated talk on customs and culture of Japan with emphasis on gardens and the theatre. Miss Sakai presented the ceremonial tea. Bridge was played in the afternoon at the home of Mrs. L. D. Herring.

W. I. HERRING, D.D.S., *Editor*  
Fourth District



THE FOURTH DISTRICT gathered at the Sir Walter Hotel in Raleigh. Officers for the coming year are shown in the top picture. They are: L. D. Herring, Secretary-Treasurer; T. G. Collins, President; Newton Smith, Vice President; and C. P. Osborne, Jr., President-Elect. Two of the popular table clinics are pictured below.

# Report Fro

A forceful presidential address and warm hospitality, balanced by an informative scientific program, highlighted the Fifth District Meeting in Rocky Mount, October 9-10.

President Gray covered many aspects of organized dentistry in his address. Among other things he pointed out that the Fifth District held the shortest meeting in the state. For this reason time allotted for table clinics had to be curtailed. Since table clinics to be presented at the annual state meeting are selected from those presented at the district meetings, Dr. Gray stated that more emphasis should be placed on them at the district level.

He also advocated the allotting of more time for the main clinician and the question and answer period which follows. Dr. Gray is to

be congratulated for his thought-provoking address.

Dr. Robert Gilbert, in his charge to the eight new members, challenged them to uphold the responsibility of dentistry in the nation. The new members include: O. H. Brown, Ayden; M. G. Delbridge, Goldsboro; T. C. Hesmer, Jr., Wilson; R. N. Hines, Jr., Edenton; F. H. Howdy, Washington; Fabian Morgan, Goldsboro; C. B. Sabiston, Jr., Enfield; and J. T. Wall, Wilson.

Dr. R. A. Daniel, our new President for the coming year will be working with the following officers: R. B. Barden, President-Elect; T. S. Fleming, Vice President; W. L. Hand, Jr., Secretary - Treasurer; C. P. Godwin, Editor; M. M. Lilley and J. B. Houser, Executive Com-

# cky Mount

mittee; R. Fred Hunt, C. R. Minges, W. W. Umphlett, C. B. Johnson (New Bern), and R. H. Gilbert, Delegates to N.C.D.S.

Dr. Richard L. Simpson from the Medical College of Virginia presented a most informative paper on "What Do We Want in Our Fixed Restorations?" His review of many basic concepts on successful bridge construction was superb.

During the final business session an invitation from Dr. Dan Wright to meet in Greenville next year was accepted. The members of the Fifth District are grateful to the Rocky Mount Dental Society and to the District Officers for a splendid meeting.

ROX A. MILLER, D.D.S.,  
*Editor, Fifth District*



ROCKY MOUNT was the host city to the Fifth District in 1960. At the top are the new officers installed. From left to right they are: C. P. Godwin, Editor; R. B. Barden, President-Elect; W. L. Hand, Jr., Secretary-Treasurer; and R. A. Daniel, Jr., President. Many fine table clinics were presented and two of them are shown below.

# Study Club

## Activities

in

## North Carolina

BAXTER B. SAPP, JR., D.D.S.,  
*Chairman*  
Statewide Study Club Committee

### Raleigh Dental Study Club

This club, which has devoted most of its time and energy to the study of Periodontia, has held four very fine meetings this quarter. In August, Dr. H. S. Zaytoun presented a talk on "The Relations of Orthodontia and Periodontia" and Dr. J. M. McAllister presented patients with dilantin hyperplasia, periodontosis, and fibrous hyperplasia. Dr. R. E. Richardson gave a presentation on "Oral Medicine and Periodontia" for the September meeting, and Dr. Royster Chamblee gave a clinic on "Clinical Periodontia" for the October meeting. In November a two-day postgraduate course was held at the UNC School of Dentistry in Chapel Hill. The program was arranged for the Club by the Periodontia Department of the school. The course was as follows: "Temporomandibular Joint Dysfunction and Treatment," by Dr. Grover Hunter; "Clinical and Radiographic Diagnosis of Periodontal Disease," by Dr. Don Allen; "Local Factors in the Etiology of Periodontal Disease," by Dr. Eli Attayek; "Systemic Factors in the Etiology of Periodontal Disease" by Dr. Robert Sager; "Curettage, Root Planing, and Reattachment" by Dr. Paul Cummings; "Selective Occlusal Grinding" by Dr. Paul Cummings; "Flap Operation and Gingivectomy," by Drs. Eli Attayek and Don Allen; and "Lowering Muscle Attachment and Frenectomy" by Dr. Robert Sager.

### Rough Butt Bald Dental Study Club

The Club's activities have centered around the discussion of various phases of Dentistry. The December meeting consisted of dis-

cussions on commercial dental laboratories.

### **Radiology Study Club**

This club has been proposed by Dr. C. E. Crandell and thus far seven people have expressed an interest — four dentists in North Carolina, one in Virginia, one in Florida, and one in Alabama. Anyone wishing to voice an interest should write Dr. Crandell at the UNC School of Dentistry.

### **Ernest Branch Dental Study Club**

The club's next meeting will be held in Charlotte on January 21 and 22. Drs. Marion Ralls and Walter Moore will present a program on "Operative and Restorative Procedures as Used in Children's Dentistry." Drs. C. V. Winter and Neal Sheffield, Jr. presented a program at the First District Meeting on "Clinical Photography." They represented their Study Club.

### **Piedmont Dental Study Club**

The first meeting of the quarter was a general discussion of various clinical techniques used by the various members. Dr. Robert Nelson, Associate Professor of Orthodontics at the UNC School of Dentistry, gave an excellent clinical program on the fabrication of simple orthodontic appliances. Dr. Nathan Shuper, Veterans Administration Hospital, gave a program on "Prosthetics." The last meeting of the quarter will feature Dr. C. E. Cran-

dell, UNC School of Dentistry Department of Radiology. He will present a program on "The Problem of Dental Radiodontics."

### **Burlington Dental Study Club**

These men are currently engaged in their project of "Operative Dentistry."

### **Charlotte Dental Study Club**

The Charlotte group has been keeping abreast of dental literature. Each member of the club has presented a five or ten minute talk on an interesting article. Reports have also been given on the various meetings attended by members.

### **Guilford Prosthetic Study Club**

Since the inception of their club earlier this year, these men have been vigorously engaged in an excellent clinical project. Each member of the club made full dentures for the same patient and in each instance the operator used a different technique. The patient was allowed to wear each set of dentures for a given time. A report will be published in the next issue of the Journal regarding their findings. They are now engaged in a similar project with partial dentures. Such sincere effort is admired by all members of the profession.

### **Demeritt Pedodontic Study Club**

This club has been engaged with community dental health.

# Temporomandibular Joint

NICHOLAS G. GEORGIADÉ,  
M.D., D.D.S.\*  
Durham, North Carolina

**D**ISTURBANCES and disease processes of the temporomandibular joint and the surrounding structures are seen most often initially by the general practitioner in his medical or dental practice. Considerable relief can be afforded these patients by keeping in mind certain characteristics of this area.

The development of an entire masticatory apparatus, including the teeth, mandible, muscles of mastication and articulation, is a correlated interdependent one. The temporomandibular joint differs in its construction in many respects from other joints. It is divided by a disc into two separate parts with three components, namely, the condylar head, meniscus (disc) and articular

fossa and eminence of the temporal bone. Each joint space is lined by a synovial membrane which attaches to the border of the articular surface and the border of the meniscus, the articular surface of the condyle being covered by a thin layer of fibrocartilage. The meniscus has varying degrees of cellularity, with the midportion being composed of compact and relatively acellular fibrous tissue. The meniscus thins out laterally and posteriorly with the greater supply of blood vessels and innervation being located posteriorly and supplied by branches of the trigeminal or 5th nerve.

The temporomandibular joint can therefore be classified as a hinge joint with a movable socket and gliding movements occurring superiorly, the hinge joint motion being accomplished in the lower region.

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From the Divisions of Plastic, Maxillofacial and Oral Surgery, Duke University Medical Center.



# ysfunction and Facial Pain



When the mandible goes into the open bite position the condylar head moves anteriorly and inferiorly in the glenoid fossa along the articular eminence, taking with it the overlying meniscus. A hinge type of movement in this joint usually takes place in the open bite position and it is in this position in which the meniscus is most vulnerable to injury. Acute injuries to this joint are chiefly those of vascular dilation (hyperemia) and associated edema. Prolonged or continuous injury will result in degenerative changes occurring in the joint space.

Unfortunately pain in the temporomandibular joint and surrounding facial area may be due to a multitude of causes.

These can be divided into the following groups in order of their prevalence:

## 1. Dental Origin

A. Loss of permanent teeth, particularly posteriors, with loss of posterior vertical dimension will cause a shift in the bite, or shifting of the remaining teeth with resultant deviation of the occlusal relationship will occur.

B. Overclosure of the mandible with resultant posterior condylar positioning and greater pressure being exerted on the posterior portion of the capsule where the greatest area of vascularity and innervation is located.

C. Unsatisfactory prosthetic appliances, bridges, or operative dentistry with resultant accompanying derangements in the condylar positioning.

2. **Trauma.** Excessive opening of the bite when yawning, blow to the

mandible, particularly the chin area, excessive strain or opening during tooth extractions, biting on a hard substance may cause some damage to the meniscus. Once damage has occurred pain in this area will be accentuated and perpetuated if abnormalities in bite, etc., previously mentioned above, are present.

**Treatment should include:**

a. Restoration of normal occlusal relationship without cuspal interference.

b. Application of dry heat to affected joint area two or three times daily.

c. Limitation of motion initially by placing patient on soft diet and resorting to splinting of teeth if pain persists past a two or three week period.

d. Intra-articular injection of hydrocortisone acetate, 0.5 cc., in the acute phase has also been found to be of advantage (Fig. 1).

e. Meniscectomy if all other types of therapy have been attempted without success and sufficient time has elapsed (at least 5-6 months usually).

3. **Psychosomatic.** This probably plays one of the most important parts in all types of pain in this area and is perhaps initially one of the other stated causes, but is magnified and perpetuated as long as the patient is maintained in a state of tension. This situation then produces muscle spasm in any or some of the muscles of mastication, usually the masseter, temporalis or internal pterygoid (in order of frequency).

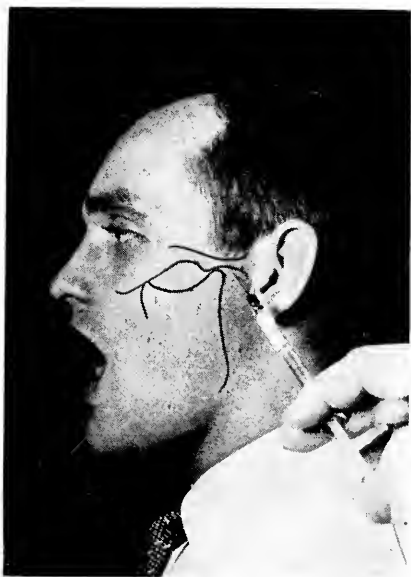
**Bruxism.** The subconscious habitual clenching and grinding of the teeth may be so persistent as to eventually restrict the motion of the

mandible. This is due to spasm of the muscles of mastication. Usually the even-wearing of all the teeth can be noticed and a diagnosis of bruxism made. Injection of the painful muscle in spasm with xylocaine and the construction of a prosthetic appliance to be worn at night, preventing contact of the opposing occlusal surfaces, will take care of these problems, providing patient's general tension state is also being treated.

One of the newer drugs, such as Librium,<sup>R1</sup> taken in 10mg. dosages three times a day and before bedtime if necessary or Placidyl<sup>R2</sup> in

R1 Trade name for Triclobisonium chloride, supplied by Hoffmann-LaRoche, Inc., Nutley, New Jersey.

R2 Trade name for Ethchlorvynol, manufactured by Abbott Laboratories, North Chicago, Illinois.



**Fig. 1**

The open bite position is preferable in injecting into the temporomandibular joint space. Care is taken to aspirate before injecting with needle located in a slightly superior midface positioning.

dosages of 100mg. three times a day and before bedtime has been found to aid in relieving nervous tension. If there is considerable muscle spasm accompanying the patient's nervous tension, Robaxin<sup>R3</sup> can be given to the patient in dosages of 500 mg. to 1 gram three times a day and at bedtime.

#### 4. Neurological

A. **Tic Douloureux** (trigeminal neuralgia) characterized by paroxysmal attacks of considerable lancinating lightening-like pain. Certain skin areas are capable of initiating pain (trigger zone). The pain is limited to distribution of the branches of the fifth nerve. Movement of the facial muscles, either in the act of talking, mastication or tongue movement against the buccal surface, are the usual areas for precipitating the pain. Usually the pain is along the third division of the fifth cranial nerve; however, as the attacks become more frequent and severe, there seems to be a spread to the second division. The pain may extend out to the lip, tongue or to the teeth.

**Treatment:** Alcohol block of the peripheral nerve should probably be tried initially. This can usually be relied on to give temporary relief for months, the best results being obtained when the alcohol is injected into the nerve under direct vision of the nerve root itself.

Stilbamidine isethionate has been given intravenously with a delayed relief occurring between the first to the fourteenth week. This may produce bilateral facial paresthesias and

associated itching. Surgery is directed toward interruption of the painful pathways via the peripheral branches of the Gasserian ganglion, the posterior sensory root in the middle or posterior cranial fossa.

#### B. Glossopharyngeal Neuralgia.

This is usually seen in the older aged group and similar to the trigeminal neuralgia, except for the location of pain which starts with swallowing. Pain is paroxysmal in character with radiation of the pain to the sides of the neck, angle of the mandible and external auditory canal region.

**Treatment** usually surgical with intervention of the glossopharyngeal and vagus nerve intracranially.

C. **Sphenopalatine Neuralgia** is characterized by a constant burning-type of pain in the maxilla which may be referred to the teeth in the same area or adjacent palate, pharynx, nose, eye or auricular region.

D. **Atypical Facial Pain** is characterized by deep facial pain over the malar eminence, auricular area, posterior to the eye occurring more commonly at night. The pain is gradual in onset with increasing severity over a period of hours and decreases in intensity in the same fashion. The pain localization follows the external carotid artery pathway and is thought to have a vascular component. Histamine desensitization and the use of ergot derivatives, such as ergotamine tartrate, have been of value in minimizing the dilatation of the arterial tree.

#### 5. Pathological

A. **Tumors** or cysts of the mandible and maxilla causing direct and

<sup>R3</sup> Trade name for Methocarbamol, manufactured by Robins Co., Inc., Richmond, Virginia.

referred pain, usually occur early. Increased size and persistence will eventually cause paresthesias.

**B. Nasopharyngeal Tumors**—high in lateral pharyngeal fossa at the base of the skull involving the second and third divisions of the mandibular nerve as well as the ninth and tenth cranial nerves.

**C. Acoustic Neuromas** or cerebello-pontine angle meningiomas may become of sufficient size as to produce fifth nerve tics. This is associated with other signs, such as facial weakness, deafness, vertigo and palatal weakness.

**D. Elongated Styloid Process.** Lancing pains in the ear and lower jaw can be produced by an elongated styloid process. This is usually associated with pain in the lateral pharyngeal wall and dysphagia. The diagnosis can be made by palpation of the styloid process in the tonsillar area.

**E. Osteoarthritis** or degenerative joint disease occurring in the temporomandibular joint is characterized by actual destruction of the cartilage and bone with associated pain, particularly on mandibular movement. Looseness of the joint capsule and loose attachment of the articular disc (meniscus) will result in hypermobility of the condyle and eventual destruction of the meniscus. Crepitation is noted by the patient and characterized by popping, cracking and grating sensation.

Planigrams of the temporomandibular joint may reveal the presence of bony spurs and exostosis which contribute to the patient's discomfort in opening and closing the jaw.

Surgical removal of the torn men-

iscus as well as removal of any bony abnormalities has been found to be of value (Fig. 2).

**F. Rheumatoid Arthritis.** This is a systemic disease, usually affecting other joints such as the proximal interphalangeal joints of the fingers first. In the acute stage there is a great deal of pain and tenderness and swelling in the preauricular area. In the chronic stage there is a marked decrease in mandibular motion and eventual ankylosis.

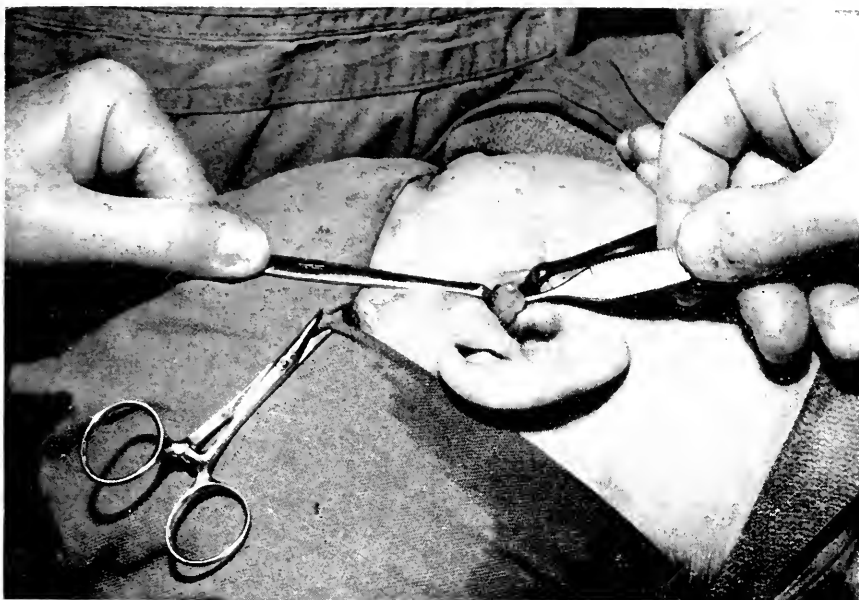
## SUMMARY

Temporomandibular joint pain and associated facial pain is due to a multiplicity of causes. The majority of patients fitting this category usually are tense, nervous individuals who also have some dental or occlusal disharmony. They will often have spasm of the muscles of mastication with resultant trismus. Pain of mandibular joint origin will always be manifested initially in the preauricular area. Distribution of pain can then be transmitted via the auriculotemporal nerve which supplies the capsule and meniscus.

A meniscectomy is indicated when there is repeated dislocation of the meniscus with blocking of the condylar head, preventing anterior movement. Tearing of the meniscus or partial erosion in acute traumatic episodes with resultant persistent cracking, noises and persistent pain with progressive interference of function should be treated surgically.

## CONCLUSION

Any patient with undiagnosed temporomandibular joint facial pain should be made aware of the prob-



**Fig. 2a**

Approach to the temporomandibular joint is shown with exposure and traction of meniscus.

able association of the pain with occlusal disharmony and muscle spasm and with its precipitation on a psychogenic basis. Sedation or use of tranquilizers in conjunction with previously-mentioned therapeutic procedures will yield the greatest number of satisfactory results.



**Fig. 2b**

Immediate postoperative view of meniscectomy site.

# Estate

## Planning\*

FRANK D. BOZARTH  
Senior Vice President & Trust Officer  
Durham Bank & Trust Company  
Durham, North Carolina



**T**HERE are more important things than estate planning: living; rearing, training and enjoying your children; and enjoying yourself. The best thing you can do for your family is to live, not die.

Nevertheless, a man recognizes the need—for his own benefit and his family's—to insure his life, to protect the family against his death and, by accumulation and investment, to provide for his own and his wife's old age.

A part of all this is the matter of planning wills and trusts so that, after death, investment accumulations and the proceeds of life insurance will be certain to protect widows and children.

Estate planning is a law-given right. It is a duty to yourselves and a duty to your families. More than likely, it will be the easiest money you ever made.

\* \* \*

Dr. Charles L. B. Lowndes (Duke University Law School), in a recent article and among other things, said "Death is certain, but how about taxes? He pointed out that Federal Estate Tax rates begin at 3 per cent and run as high as 77 per cent and that on a taxable estate of \$10,000,000, Federal Estate Tax may be over \$6,000,000. He then asked two questions: (1) How, with such terrific tax rates, do large estates survive? (2) Why, with such terrific tax rates, is the Government's take from Federal Estate Tax so relatively infinitesimal when compared with its other sources of revenue?

He gave one answer to both questions; namely, that there is a vast difference, particularly in large estates, between the tax normally payable and the tax that is actually paid. Dr. Lowndes then stated that

\* Presented at the 105th Annual Session of the North Carolina Dental Society, May 1-4, 1960, Pinehurst, North Carolina.

the Federal Estate Tax sieve, or net, has holes through which a two-horse wagon can be driven; and that the only persons who are actually caught are "the naive souls who are unaware of the need to plan against it."

Now, how are you to go about planning? First, forget the idea that it can be done without any expense; second, forget the idea that by planning you should escape all tax; third, forget the idea that planning is something that has to be re-done every four or five years.

Use capable specialists, such as a competent attorney and a competent accountant. Use the free services of your underwriter and the advice of your bank's trust department.

The Family Trust plan is one very good way. An innovation of quite recent years, it is now well developed and widely accepted. It adapts itself automatically to changing family and financial circumstances. It provides maximum protection for your family, for your life insurance proceeds and for your other assets. It is designed to take full advantage of the Federal Marital Deduction,

to result in minimum Estate and Inheritance Taxes, to provide professional management for your assets, and to reduce estate administration expenses and the publicity of family financial affairs. It retains for you complete freedom to make tax-reducing gifts in later life.

Let us study some relatively simple examples of estate planning. We will take Dr. A. B. See as a typical professional man and consider his family, financial and tax situation at various stages in his life.

First, we find him at age thirty with a wife of twenty-seven and one small child. Dr. See has been hearing about death taxes. He is, however, more concerned at the moment because he has no will and understands that (in his State) half of his property would go to his wife and the other half to his two-year-old child (necessitating a guardianship, etc.).

Dr. See seeks some knowledgeable advice. His advisor first puts on paper the following financial information: (See Table Below)

Dr. See is told that he has two reasonable choices: the first (re-

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	<i>Mrs. See</i>	<i>Joint</i>	<i>Dr. See</i>	<i>Total</i>
Home—less mortgage .....		\$ 18,000		
		12,000		
		<hr/>		
		6,000		\$ 6,000
Cash .....	\$ 200		\$ 700	900
Other assets .....	2,000		3,000	5,000
Life insurance:				
Mortgage reduction .....			12,000	
Convertible term .....			15,000	
Straight life .....			25,000	52,000
	<hr/>	<hr/>	<hr/>	<hr/>
Totals .....	\$ 2,200	\$ 6,000	\$ 55,700	\$ 63,900

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quiring little thought and few words) would leave (Plan A) all to Mrs. See outright. (Throughout these examples we will assume that Mrs. See survives, and that she would be able to retain all the property and pass it on to the child or children.) The advisor suggests, however, that Dr. See study the possibilities of

(Plan B) a Family Trust. This would take some careful consideration by Dr. See and would involve, in his financial situation, attorney's fees of, say, \$150 to \$250.

Now see the differences in Plan A and Plan B and the difference in the overall (his death and her death) tax results:

PLAN A			PLAN B		
Leaves all to wife outright. She survives five years or more dies and leaves all to child.			Mortgage reduction insurance pays mortgage and wife takes home: \$18,000 All the rest of estate, including insurance, goes into Family Trust: all income to wife with remainder to child: \$43,700		
			<b>TAXES</b>		
A			B		
			<i>His death</i>		
—0—			—0—		
\$ 354	\$ 354		\$ 282	\$ 282	
			<i>Her death</i>		
106			—0—		
1,598	1,492		204	204	
<u>\$ 1,952</u>		Total		<u>\$ 486</u>	

That \$1,466 tax saving (Plan B over Plan A) is not expected to excite you. Remember however, that Plan B accomplishes other valuable things. It avoids financial confusion and protects the child in case both Dr. and Mrs. See die.

#### NOTES:

- I As indicated, the State tax figures are those effective in North Carolina. Much the same result would come about in most of the 50 States.
- II While the total estate passing at

Mrs. See's death is practically the same as at Dr. See's prior death, no Federal Marital Deduction is available to her estate; also, the State widow's exemption and certain special State insurance exemptions available in his estate are not available in hers.

- III The Family Trust (Plan B) gives the Trustee authority to pay principal (as well as income) to Mrs. See when necessary for the comfort of the family and education of the child or children.



As our next example, let us consider Dr. See's situation at age forty. The wife is now age thirty-seven and they have three children: twelve, ten and seven. Dr. and Mrs. See now have a more valuable house and

have it paid for. In addition to some further accumulation of stocks and bonds, he has converted his term insurance to straight life and increased the total. So, the financial situation is:

	<i>Mrs. See</i>	<i>Joint</i>	<i>Dr. See</i>	<i>Total</i>
Home .....		\$ 27,000		\$ 27,000
Cash .....	\$ 800		\$ 1,500	2,300
Stocks .....	2,000		5,000	7,000
Bonds .....			5,000	5,000
Savings & Loan.....	2,000			2,000
Life insurance: Straight life....			60,000	60,000
Totals .....	\$ 4,800	\$ 27,000	\$ 71,500	\$103,300

and the two plans work out thus:

#### PLAN A

Leaves all to wife outright. She survives five years or more, dies and leaves all to children.

#### PLAN B

Marital deduction provision comes into operation:

Wife takes:

Home .....	\$27,000
Other assets .....	19,850
Her property .....	4,800

\$51,650

Balance to Family Trust:

Income to wife with remainder to children .....\$51,650

#### TAXES

A		B	
	—0—		—0—
\$ 1,350	\$ 1,350	\$ 1,177	\$ 1,177
	\$ 5,213		
6,770	1,557	—0—	
		432	432
<u>\$ 8,120</u>		<u>432</u>	<u>432</u>
	Total		\$ 1,609

The tax saving of Plan B over Plan A has become interesting.

Let us assume that Dr. See carries on to age fifty. His wife is then forty-seven. They have the same three children, now aged twenty-

two, twenty and seventeen. Dr. See has added \$20,000 to his life insurance, and increased and diversified other assets, thus:

	<i>Mrs. See</i>	<i>Joint</i>	<i>Dr. See</i>	<i>Total</i>
Home .....		\$ 27,000		\$ 27,000
Cash .....	\$ 1,100		\$ 2,600	3,700
Stocks .....	6,000		20,000	26,000
Bonds .....			10,000	10,000
Savings & Loan.....	3,000		7,000	10,000
Life insurance: Straight life....			80,000	80,000
Totals .....	\$ 10,100	\$ 27,000	\$ 119,600	\$ 156,700

and tax results are:

### PLAN A

Leaves all to wife outright. She survives five years or more, dies and leaves all to children.

### PLAN B

Wife takes:

Home .....	\$27,000
Other assets .....	41,250
Her property .....	10,100

\$78,350

Balance to Family Trust:

Income to wife with remainder to children .....\$78,350

### TAXES

A		B	
		<i>His death</i>	
	\$ 863	Federal	\$ 1,418
\$ 4,168	3,305	North Carolina	2,773
		<i>Her death</i>	
	18,168	Federal	1,418
21,513	3,345	North Carolina	1,146
			2,564
\$25,681		Total	\$ 6,755

This would be a good place to say that the Family Trust plan contemplates a will by Mrs. See which would give to the Family Trust her separate estate if, having survived Dr. See, she died while the youngest child was still under twenty-five; that the whole estate would then be held for

the children until the youngest reaches twenty-five; children under twenty-five to be supported and educated at the expense of the whole; funds remaining in the hands of the Trustee to be divided equally when the youngest child is twenty-five.

For our final example we consider the situation at Dr. See's age sixty when his wife is fifty-seven and the three children are all over twenty-five (thirty-two, thirty and twenty-seven). They have the same house, which has gone down slightly in value; Dr. See is taking longer vacations and has acquired a summer place. His life insurance remains the same but he has accumulated some additional stocks, bonds, and savings and loan deposits. The financial situation is:

	<i>Mrs. See</i>	<i>Joint</i>	<i>Dr. See</i>	<i>Total</i>
Home .....		\$ 25,000		\$ 25,000
Summer place .....		12,000		12,000
Cash .....	\$ 1,500		\$ 3,300	4,800
Stocks .....	8,000		25,000	33,000
Bonds .....			25,000	25,000
Savings & Loan.....	5,000		9,000	14,000
Life insurance: Straight life....			80,000	80,000
Totals .....	\$ 14,500	\$ 37,000	\$142,300	\$193,800

and the comparable tax results are:

<b>PLAN A</b>	<b>PLAN B</b>
Leaves all to wife outright. She survives five years or more, dies and leaves all to children:	Wife takes:
	Home .....\$25,000
	Summer place ..... 12,000
	Other assets ..... 45,400
	Her property ..... 14,500
	<u>                    </u>
	\$96,900
	Balance to Family Trust:
	Income to wife with remainder to children .....\$96,900

		<i>TAXES</i>		
<b>A</b>			<b>B</b>	
		<i>His death</i>		
\$ 2,951		Federal	\$ 4,242	
\$ 7,641	4,690	North Carolina	3,554	\$ 7,796
		<i>Her death</i>		
27,569		Federal	4,242	
32,225	4,656	North Carolina	1,677	5,919
<u>          </u>	<u>          </u>		<u>          </u>	<u>          </u>
\$39,866		Total		\$13,715

There are, of course, many other plans which would achieve similar tax savings and family security. The Family Trust has been used above because it is, I believe, a good plan and is easily understood. Keep in mind that it could have been adopted by Dr. See at age thirty and (without any expense during his life other than attorney's fees for the original preparation of the trust agreement and the wills) would have produced a good overall family security and tax-reduction result had Dr. See died

at any time thereafter.

One point I have been trying to make indirectly is that adoption of a good estate plan is much more important than repeated worry over possible gifts to minor children, short-term trusts, assignment of life insurance to wife and/or children, etc., etc. Those things have their place but, more often than not, might better be postponed until the children are grown and the comfort and security of the parents are assured.

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# Science Fairs and Dentistry

C. E. CRANDELL, D.D.S.\*

• There is growing concern in dental education that both the quality and quantity of students applying for dental schools is less than it has been. One of the best ways to encourage more and better students to study dentistry is through participation in the Science Fairs being conducted in the Public Schools. There are many ways in which dentists can take an active part in these programs. It is most important that members of the profession make themselves available to interested youngsters and advise them on projects related to dentistry.

Constituent, component, and local dental societies can sponsor the science fairs at the local and regional levels and thereby stimulate elementary and high school students to become interested in dental science. In addition to encouraging the more imaginative students to become interested in a dental career, dental society participation will be a significant contribution toward improved public relations for the profession. Societies should appoint

Science Fair Committees. Local school administrators should be contacted by the committees or by individuals. Societies or individuals may wish to award special citations for projects related to dental science.

The American Dental Association has strongly supported this program in the past, awarding expense-paid trips to the annual meeting and other awards.

Following is a list of printed aids that interested dentists may write for to become more acquainted with the Science Fair Program:

ASSOCIATION LAUNCHES SCIENCE FAIR PROGRAM, see J.A.D.A. 58: 114-114, Jan. 1959.

DENTAL PROJECTS FOR HIGH SCHOOL SCIENCE STUDENTS, can be ordered from A.D.A. Order Department, 222 E. Superior St., Chicago 11, Ill. 50 copies for \$5.00, single copy price unknown. Other information is also available.

SCIENCE FAIR HANDBOOK FOR EXHIBITORS, can be ordered from Educational Section, American Museum of Atomic Energy, P. O. Box 117, Oak Ridge, Tenn. Free.

SPONSOR HANDBOOK, can be ordered from Science Clubs of America, 1719 N. Street, N. W., Washington 6, D. C. Cost \$1.00, but many related materials are free at this same address.

THE HIGH SCHOOL JOURNAL FOR FEBRUARY 1956 has the entire issue devoted to Science Fairs.

SCIENCE FAIR MANUAL, can be ordered from the Director, North Carolina Science Fairs, Institute of Natural Science, University of North Carolina, Chapel Hill, North Carolina. Free.

\* Chairman, Science Fair Committee, North Carolina Dental Society.

# Summary Report

TO

THE NORTH CAROLINA DENTAL SOCIETY

101st ANNUAL SESSION

HOUSE OF DELEGATES

AMERICAN DENTAL ASSOCIATION

Los Angeles, California

October 17-20, 1960

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**The North Carolina Delegation:** The following were delegates from North Carolina to the American Dental Association House of Delegates, Los Angeles, California, October 17-20, 1960: Doctors Frank O. Alford, Luther H. Butler, Walter T. McFall, C. C. Poindexter, Norman F. Ross and Bernard N. Walker. Mr. A. M. Cunningham, Executive Secretary sat with the delegation in all sessions of the House.

All the above delegates attended all three sessions of the House of Delegates. Dr. Poindexter was named by the delegation as floor chairman. The North Carolina Delegates also were present for a Fifth District Caucus Meeting on Wednesday morning.

Delegates R. Fred Hunt and Wilbert Jackson were unable to attend because of illness and alternate delegates Butler and Ross were seated to replace them.

## MONDAY, OCTOBER 17

The House of Delegates was called to order by Speaker of the House, Gerald D. Timmons at 1:00 p.m. Following the introduction of distinguished guests and approval of the Reports of the Committees on Credentials and Rules and Order, Dr. Paul H. Jeserich, President of the American Dental Association delivered his presidential address.

**The President's Address:** Dr. Jeserich outlined events of the past year and spoke of his hopes for the profession in the future. He urged dentists to interest themselves more actively in the profession's affairs. He said "our chief barriers are complacency and defective public relations." He cautioned urgently against resisting change and commented "the future will need men of courage and vision, who dare greatly and dream greatly for the fulfillment of their rights, and above all, men who make their work catch up with their dream."

He expressed concern "at the reaction of some dentists and some members at the recent action of an agency (Council on Dental Therapeutics) in recognizing the effectiveness of another weapon in the control of dental caries — the stannous fluoride dentifrice."

He stressed "the years of careful study" and scrupulous consultation "that led the Council on Dental Therapeutics to bestow recognition."

**Other business:** Reports of the Board of Trustees on Association affairs, their comments on reports of councils and resolutions of con-

stituent societies, and the 1961 Budget were presented.

**Life Membership:** The House approved a resolution submitted by the Board of Trustees nominating 1,016 members for classification as Life Members. Included were 55 members from North Carolina.

The list of referrals of reports and resolutions as submitted by the Speaker of the House was approved.

## TUESDAY, OCTOBER 18

**Hearings of Reference Committees:** There was no meeting of the House of Delegates on Tuesday, October 19. Hearings by the reference committees on all matters before the House were held in the morning and afternoon. All members of the Association are privileged to attend these meetings and to participate in the deliberations. The members of the North Carolina delegation took advantage of this opportunity. Some of the members were assigned specific hearings by Fifth District Trustee, William Garrett and were requested to report on these hearings at the Fifth District Caucus on Wednesday morning.

These reference hearings are a sounding board for expression of opinion by all members of the profession. It is not generally understood that every member is entitled to attend these hearings and speak if he so desires. Some of the most interesting discussions on all important activities of the profession can be heard at the hearings and very often what these individual members say has a great deal of bearing on the reports of the reference committees.

## WEDNESDAY, OCTOBER 19

The House of Delegates convened at 1:00 p.m.

**Civil Defense:** It was noted that the A.M.A. had filed with the Office of Civil and Defense Mobilization a recommendation concerning medical procedures that dentists should be prepared to execute with maximum efficiency in a disaster. This was the first time the A.M.A. had formally recognized the need for dentists to be trained as members of the emergency health team.

The House also approved a resolution urging dentists to take an active part in civil defense and mobilization training in their communities and to train themselves to perform medical services which will effectively assist the medical profession in event of a disaster; and urging constituent and component societies to develop programs to enable their members to acquire the necessary proficiency in emergency medical treatment.

The House also approved a resolution urging constituent societies to seek enactment of state legislation which would provide immunity from civil suit and exemption from state medical licensure requirements for dentists during civil emergencies.

Further, the House endorsed the Family Shelter Program promulgated by the Federal Government and urged individual dentists "to contribute to the security of the nation by taking such measures as reasonably will insure the ability of himself and his family to survive a nuclear attack."

**Dental Trade and Laboratory Relations:** The House amended the Bylaws to more clearly and ade-

quately describe the duties of the Council on Dental Trade and Laboratory Relations and authorizing the Council "To conduct studies and make recommendations on programs which will maintain for the dental profession the complete legal, as well as professional, responsibility for providing prosthetic dental services to members of the public."

The House committed to the Board of Trustees for further study a resolution that the ADA produce a film on dental prosthetics.

**Action on Crest Dentifrice:** The House rejected a proposal by a vote of 279 to 94 to rescind the action of the Council on Dental Therapeutics in approving Crest Toothpaste.

**Dental Education:** The House urged dental schools and federal dental services to create or expand experiment and research in training of dental assistants and hygienists; approved certain requirements for the approval of a certification board for assistants; and rejected a proposal that provisional approval be given to experimental assistant training of less than one year's duration.

## THURSDAY, OCTOBER 20

The House convened at 9:30 a.m.

**Hospital Standards:** The House approved amendments to "Basic Standards of Hospital Dental Service" and "The Dental Service and Dental Staff" and adopted a restatement of "Dental Standard" as a basis of discussion with the Joint



Commission on Accreditation of Hospitals.

**Dental Specialties:** The House postponed action for one year on a proposal that after January 1, 1965 all members who announce themselves as specialists or as limiting their practices in one of the areas approved by the ADA be required to hold a certificate from a national certifying board approved by the ADA or a state license permitting such announcement.

The House approved a revision of Section 18 of the Principles of Ethics as follows:

**Section 18. Announcement of Specialty Practice.** — A dentist who limits his practice to an area of dentistry may include that information in his cards, letterheads, announcements and directory listings, consistent with the custom of the dentists of the community, if the following conditions are met:

1. The indicated area of dentistry must be one for which there is a certifying board approved by the American Dental Association.

2. The dentist's practice must be limited exclusively to the indicated area of dentistry.

3. The dentist must be a diplomate of a certifying board approved by the American Dental Association for the indicated area of dentistry; or he must be a member of, or be eligible for membership in, a specialty society officially related to a certifying board approved by the American Dental Association for the indicated area of dentistry; or he must have a state license in the indicated area of dentistry if he practices within a state which li-

censes dentists who engage in specialty practice.

The use of the words "specialist," "specializing in," or similar descriptions in directory listings should be discontinued within a reasonable time after this principle is promulgated.

The House also approved a resolution which limits the areas of dental practice to the minimum which will assure the public of the competence of the dentist who holds himself out to the public as a specialist.

The House voted to continue for a reasonable period the seven specialty areas now recognized by the ADA; which in effect lifted the moratorium on the establishing new certifying boards; and requested the seven specialty boards now recognized to present to the Council on Education an acceptable definition of the scope of their areas and evidence that a majority of their diplomates restrict their practices full time to those areas.

**Administrative Matters:** The House cast an advisory vote of 269-122 in favor of the Board of Trustees's decision to hold the 1965 annual session of the ADA in Las Vegas.

The House rejected a proposal to eliminate the offices of second and third vice-presidents and to confer voting powers to the President-Elect and the Vice-President as members of the Board of Trustees.

The House approved a resolution eliminating the Council on Membership.

The Board of Trustees was requested to make a grant to the Fund for Dental Education, one half of

which is to support the program of the American Association of Dental Schools. (The Board later set the total grant at \$50,000.)

**Public Health:** The House approved the following definition of a dental service corporation.

"A dental service corporation is a legally constituted not-for-profit corporation sponsored by a state dental society to negotiate and administer contracts for group dental care."

The House adopted a resolution requesting the Council on Dental Health to:

- (1) provide guidance to constituent dental societies on the organization and operation of dental service corporations;

- (2) provide a mechanism for interchanging information to minimize the duplication of costly pilot programs;

- (3) effect the development of interstate and national coverage that will be adaptable to the needs of the individual states and regions;

- (4) establish standards for the recognition of dental service corporations as official agencies;

- (5) provide guidance in the development of co-operative administrative arrangements with Blue Cross and Blue Shield agencies for the administration of claims, payment, sales and promotion;

- (6) develop effective liaison with national Blue Cross and Blue Shield agencies.

The House also approved a resolution requesting all agencies concerned with interscholastic athletics be urged to make mandatory the wearing of properly fitted, individually fabricated mouth protec-

tors by members of school football teams and those engaged in other body-contact athletic activities during practice sessions and games and directing appropriate agencies of the ADA to implement this program in every way possible.

The House adopted a recommendation that the ADA support "a strong program of health education as a basic part of school and college curricula and encouraging constituent and component societies to work with appropriate health and education officials in their communities to achieve this end."

**Legislation:** The House approved action by the ADA to support upgrading the rank of the Director of the Armed Forces Institute of Pathology to Brigadier General or Rear Admiral.

A proposal that the ADA prepare a brochure to guide constituent societies as to the areas to be covered by dental practice acts was rejected by a vote of 191 to 182.

The House approved a resolution to allow the Council on Legislation to exercise its own discretion in recommending specific allocation of funds for dental programs in legislation presented to Congress.

The Reference Committee urged all constituent societies "to seek participation in the implementation of state programs under the recently enacted aged health care legislation" and to make sure that "eligibility for benefits be based upon a realistic determination of need."

The House agreed that the professional conduct of a member is to be governed "by the Principles of Ethics of the ADA and by the Code of Ethics of constituent and component societies within whose juris-

diction he practices, or conducts or participates in other professional dental activities.”

**Miscellaneous Business:** The House endorsed the principle that dental societies must have complete control of their publications and disapproved any agreement between dental societies and publishers in which complete professional control does not rest with the dental societies concerned.

The House postponed indefinitely a resolution changing the age requirement for ADA Life Membership from 65 to 70 years of age.

The House adopted a resolution requesting constituent and component societies to develop a mechanism whereby recent graduates and those returning from service can be admitted to membership with the minimum of delay and thus safeguard participation in group insurance programs.

The House rejected a resolution abolishing the bonus payment to constituent societies in the Annual Relief Fund Campaign who meet their quota and pay out in grants a sum greater than the regular refund received.

**Election of Officers:** The following officers were elected unanimously and installed at the close of Thursday's session:

President — Charles H. Patton, Philadelphia.

President-Elect — John R. Abel, Los Angeles.

First Vice President — John B. Wilson, San Marino, California.

Second Vice President — Russell I. Todd, Richmond, Kentucky.

Third Vice President — Clare S. Renouard, Butte, Montana.

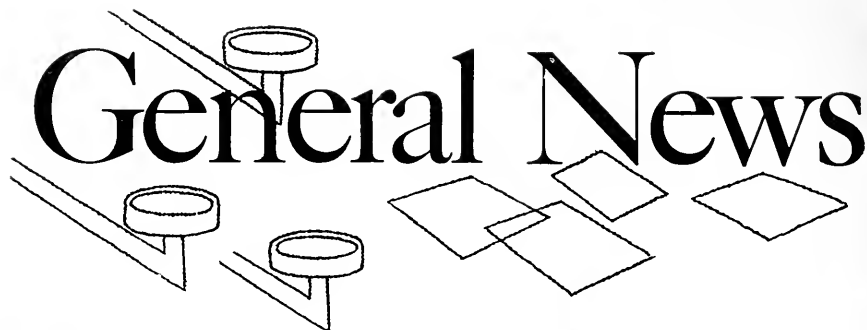
Speaker of the House — Gerald D. Timmons, Philadelphia.

Trustees — District 2: Edward Mimmack, Buffalo, New York. District 9: Aloyse E. Krapp, Milwaukee, Wisconsin. District 11: Fritz A. Pierson, Lincoln, Nebraska. District 12: John S. Eilar, Albuquerque, New Mexico. District 13: Roger Trueblood, Glendale, Arizona.

The 101st Session of the ADA House of Delegates adjourned at 1:20 p.m. *sine die*.

**Comment:** All the actions of the House do not necessarily reflect the thoughts and wishes of all members of the North Carolina delegation. However, they do represent the wishes of the majority in the House and as such we do accept them in accordance with the principle of democratic rule.

C. C. POINDEXTER, Chairman  
North Carolina Delegation



## **House of Delegates Meet in Special Session**

The House of Delegates of the North Carolina Dental Society met in special session, Sunday, December 11, at The Carolina in Pinehurst. The extra meeting was called by President Butler pursuant to a directive adopted by the 1960 House of Delegates.

Dr. Ralph D. Coffey presided as the first Speaker of the House in the history of the Society. Last May the Constitution and Bylaws were amended to provide for the new office.

The following resolutions were adopted by the House of Delegates:

(1) Resolved, that the Legislative Committee and legal counsel be directed to prepare and cause to be submitted to the next session of the General Assembly of North Carolina amendments to the General Statutes of North Carolina to provide for a system of election of members of the North Carolina State Board of Dental Examiners by all registered dentists in North Carolina, and the elimination from the General Statutes of the requirement that the members of the Board be members of the North Carolina Dental Society.

(2) Resolved, that the Legislative Committee with the help of

legal counsel be directed to prepare and cause to be submitted to the 1961 session of the North Carolina General Assembly enabling legislation to permit the establishment of a dental service corporation.

(3) Resolved, that the enactment of occupational licensure statutes for dental laboratory technicians and commercial dental laboratories in North Carolina be opposed on the basis that such legislation is not necessary to protect the health, safety and welfare of the public; and that the Legislative Committee be directed to extend every effort and means at its disposal to vigorously oppose any effort to enact occupational licensure statutes for dental laboratory technicians and commercial dental laboratories in the North Carolina General Assembly.

(4) Resolved, that the North Carolina Dental Society approve the amendments to the General Statutes of North Carolina proposed by the North Carolina State Board of Dental Examiners and that the Legislative Committee be directed to support such legislation when introduced in the North Carolina General Assembly.

The amendments to the General

Statutes recommended by the Board of Examiners and approved by the House would: (1) Correct one section of the Dental Practice Act already declared unconstitutional by a Superior Court Judge; (2) Make prescriptions mandatory for all work submitted by dentists to dental laboratories; (3) Raise the fee for duplicating a license from \$2 to \$5; (4) Make it necessary for a reciprocal agreement to be enforced before the law would be applicable; (5) Eliminate the requirement of publishing notice of the annual meeting in at least three daily newspapers at least ten days prior to said meeting.

The House also endorsed a resolution adopted by the Executive Committee December 3, 1960, relative to the provisions of P.L. 86-778 (Social Security Amendments of 1960) passed by the 86th Congress of the United States. This bill provides for furnishing medical and dental assistance to citizens 65 years of age and over. In the resolution the Executive Committee urged the State of North Carolina "to enact such legislation as may be necessary to permit this state to participate in this program" and empowered and authorized the Committee on Dental Care of the Aged of the North Carolina Dental Society to offer its services to the State of North Carolina in the formation and implementation of plans and policies to utilize the benefits of this legislation.

At the same time, the House of Delegates went on record as opposing socialized medicine and noted that this law was another step in this direction. However, the House felt that the dental profession was almost forced to go into the pro-

gram and noted that the medical profession had about reached the same conclusion. The general feeling was that the dental profession in this state was reluctant to participate in this type of movement; but, if and when the sovereign sees fit to implement such a plan for medical and dental care for the aged, then the profession would co-operate to try to make it a success.

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## Judge Warlick Hears Society's Motion

Federal Judge Wilson Warlick heard arguments October 24 for dismissal of Dr. R. A. Hawkins' suit against the North Carolina and Second District Dental Societies. On March 30 Dr. Hawkins, a Charlotte Negro dentist filed the suit seeking an injunction to restrain the two societies from excluding him from membership. He alleged in the complaint that he was being denied membership because of his race. He also charged that because he was not a member he could not participate in the election of members of the North Carolina State Board of Dental Examiners and thereby was being denied his constitutional right.

Attorneys for the Societies told Judge Warlick that Dr. Hawkins failed to establish any violation of his constitutional rights.

Judge Warlick gave both sides until December 1 to file written briefs on the motion for dismissal and indicated he would rule on the motion shortly thereafter.

Dr. Hawkins' action is supported by the National Association for the Advancement of Colored People.

# Barden to Head D.O.C. Conference

Over thirty district and state officers assembled at The Carolina in Pinehurst on Saturday, December 10, for the Eighth Annual District Officers' Conference.

Conference President James A. Harrell presided at the afternoon session when papers on the duties and responsibilities of individual district officers were presented and discussed. At the evening session Speaker of the House Ralph D. Coffey presided over a general review of reports to be presented to the House of Delegates in special session the next morning.

The speakers at the afternoon meeting included Dr. Harrell who outlined the work of a district president. Duties of a president-elect were discussed by Dr. S. H. Isenhower, and the responsibilities of a vice-president were summed up by Dr. Robert A. George. The role of a secretary-treasurer was described by Dr. C. W. Poindexter, and the job of the editor was spelled out by Dr. B. B. Sapp, Jr. All papers presented at the Conference are to be compiled into a Manual for Component Society Officers.

N.C.D.S. President Luther H. Butler opened the meeting with words of welcome and praised the Conference for its significant contributions in perfecting administrative procedures on the district level.

At the evening session to which members of the House of Delegates were invited speakers included Col. W. T. Joyner and R. C. Howison, Jr., legal counsel for the State Society, and the following committee chairmen: Dr. Paul Fitzgerald, Jr., Dental Service Corporation;

Dr. Riley E. Spoon, Jr., Executive; Dr. Dennis S. Cook, Rules and Order; and Dr. H. Royster Chamblee, Legislative. Dr. Spoon also reported as Chairman of the Committee on the Dental Care of the Aged.

The Conference recommended that the Constitution and Bylaws Committee study the Bylaws with a view toward providing: (1) a more stringent method of seating delegates and alternate delegates at sessions of the House of Delegates; and (2) more co-ordination of appointments to those standing committees which are common to both district and state levels.

Officers elected for the coming year were: Dr. R. B. Barden, President; Dr. A. T. Lockwood, Vice President; and Dr. C. W. Poindexter, Secretary.

The Conference voted: (1) to defer printing revisions of district constitutions and bylaws until after the State Meeting in May; and (2) to hold its annual breakfast meeting at the annual session next May at which time dates for the 1961 District Officers' Conference will be determined.

Dates for the 1961 District Meetings were confirmed as follows: First District, September 30-October 2, Grove Park Inn, Asheville; Second District, September 24-25, Robert E. Lee Hotel, Winston-Salem; Third District, October 29-30, Mid Pines Club, Southern Pines; Fourth District, September 18-19, Sir Walter Hotel, Raleigh; and Fifth District, September 17-18, Country Club, Greenville.

Tentative dates for the 1962 District Meetings were announced as

follows: First District, September 29-October 1; Second District, September 16-17; Third District, October 7-8 or October 14-15; Fourth District, September 24-25; Fifth District, September 23-24.

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## **John W. Fleming Dies**

John W. Fleming, owner and operator of Fleming Dental Laboratory in Raleigh since 1931 died September 19, 1960. He was born in Escanaba, Michigan May 3, 1898 and started his career as a dental assistant to Dr. R. J. McGavock in Birmingham, Alabama.

He moved to Raleigh in 1917 where he was employed in the Raleigh Dental Laboratory under Mr. Truman Williams. Shortly thereafter he enlisted in the army and served during World War I.

He was elected the first president of the North Carolina Dental Laboratory Association in 1933 and was active in the establishment of the National Dental Laboratory Association.

With Mr. Robert Woodward of Greensboro he established the Woodward - Fleming Scholarship Fund at the University of North Carolina School of Dentistry. At the time of his death he was ardently supporting the establishment of the training program for dental technicians at the Vocational Education Center in Durham.

He was a member of the American Legion, a Past Master of the William G. Hill Masonic Lodge No. 218, a Scottish Rite Mason and Shriner. He is survived by his wife and two daughters in Raleigh.

## **Scrap Amalgam Drive March 13-18**

Scrap amalgam for the benefit of the North Carolina Dental Society Relief Fund will be collected during the week of March 13-18, 1961, according to Mrs. W. W. Rankin of Raleigh, Chairman of the 1961 Auxiliary Scrap Amalgam Drive.

An office-to-office canvas by Auxiliary members and representatives of dental supply houses is expected to provide enough scrap amalgam to make this year's drive the most successful ever conducted by the Auxiliary, Mrs. Rankin said.

She urged dentists to co-operate to the fullest in this project which annually provides funds to help brother dentists who are less fortunate.

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## **Dentists Hear UNC Chancellor**

North Carolina dentists attending the sixth annual postgraduate seminar at the University of North Carolina School of Dentistry December 7 were asked by Chancellor William B. Aycock, Jr. to support the Consolidated University budget requests to the 1961 General Assembly.

"Anything less than what we are seeking will not allow us to serve the best interests of the state," was the way he put it.

Connected with the seminar were meetings of the North Carolina Dental Foundation and the UNC Dental Alumni Association.

Dr. H. Royster Chamblee was re-elected president of the foundation, Dr. R. Fred Hunt was named to succeed himself as vice president

and Dr. John C. Brauer was elected to continue as secretary-treasurer.

The alumni group installed Dr. Cecil Lupton of Chapel Hill as president, Dr. E. P. Williams as president-elect, Dr. Fred Ogden as vice president and Dr. Walter Linville as secretary-treasurer.

Dr. Harry M. Klenda of Wichita, Kansas was the guest clinician.

The dentist's wives were entertained at a coffee hour by Chancellor and Mrs. Aycock at their Chapel Hill home, at a luncheon in the Morehead Planetarium and by a special showing of "Star of Bethlehem" in the planetarium.

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## UNC Dental Foundation Pays Tribute to Dr. Current

The Executive Committee of the Dental Foundation of North Carolina at its meeting in Chapel Hill December 6, 1960 adopted the following resolution in tribute to Dr. A. C. Current who died October 23, 1960 from injuries received in an automobile accident:

"Few men in our lifetime pass our way in the profession of dentistry who leave such a profound and lasting impression upon all the lives of those with whom he was associated. His family, church, patients, professional colleagues, and friends in business, educational and social affairs all recognized in Dr. Alfred Current a man who was dedicated to the highest principles in professional and social standards.

"'Eddy,' as his friends preferred to call him, always was ready to embrace a philosophy and program which permitted programs of his profession, his community and state. He was never too tired, too busy,

too involved in 'other affairs' to give leadership in thought and action for a cause which he deemed for the best interests of the profession and of the people of this state. His signal characteristic was expressed in strong and active support for dental education, and again, in the founding of the Dental Foundation of North Carolina, Inc., in 1950. His leadership was significant and continuous in the development of the organizational pattern and policy of the Foundation. He not only believed in the Foundation, but he supported it with much time and money.

"All people who were fortunate to really know 'Eddie' can say with great truth and conviction 'the profession of dentistry, his friends, and this world are richer in many ways because this man lived among us.'

"The phrase, 'we owe so much to so few,' certainly applies in the rich and productive life of our deceased friend and colleague Dr. Alfred C. Current. His life will continue to live in the hearts and minds of our profession for years to come."

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## Spring Seminar Planned

Dr. Sidney I. Kohn, Head of the Department of Pedodontics at Fairly-Dickenson University in Teaneck, New Jersey, will be the principal speaker at the annual Spring Seminar of the North Carolina Unit of the American Society of Dentistry for Children to be held at Chapel Hill, April 6, 1961.

Dr. Kohn is a past member of the American Board of Pedodontics and has lectured widely throughout the United States.

At its Fall Seminar in Raleigh,



November 4-5, 1960, guest lecturers included Drs. Ralph McDonald and Joseph C. Muhler, both of the University of Indiana School of Dentistry. The Unit elected the following officers for the coming year: Drs. Horace Reeves, Jr., Charlotte, President; Roy L. Lindahl, Chapel Hill, President-Elect; and Kermit Knudtson, Chapel Hill, Secretary-Treasurer.

The Unit is considering a change in the Bylaws to permit dental hygienists, dental assistants and others interested in dentistry for children to participate as Associate Members in the Unit's activities, Dr. Lindahl reports.

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## **Dental Health Week Set For February 5-11**

"A Smile Is To Keep" is the slogan for National Children's Dental Health Week which will be observed throughout the United States February 5-11, 1961.

Dr. E. McK. Hester of High Point heads the committee in North Carolina appointed by President Butler to promote statewide observance of dental health week. He has urged that local societies exploit to the fullest all possible means of focusing public attention on the importance of good dental care for children.

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## **Division of Oral Hygiene Needs Dentists**

There are a number of vacancies on the staff of the Division of Oral Hygiene for Public Health Dentists I, according to Director E. A. Pearson, Jr.

Dentists licensed in North Carolina and desiring full-time work in

the dental health program of the State can expect a salary range from \$7,920 to \$10,104. Areas of work can be provided anywhere from the seashore to the Great Smokies. For further information contact, Dr. E. A. Pearson, Jr., Director, Division of Oral Hygiene, North Carolina State Board of Health, Raleigh, N. C.

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## **Plans for 105th Session Revealed**

Dr. Gerald D. Timmons, Speaker of the A.D.A. House of Delegates and Dean of the School of Dentistry at Temple University will deliver the principal address at the opening meeting of the 105th Annual Session, May 14-17, 1961 at Pinehurst, according to a recent announcement by Dr. Charles H. Teague, Chairman of the Program Committee.

Chairman Teague has also revealed that a special panel of widely - recognized authorities on Endodontics will be presented as part of the Scientific Program.

The three main clinicians scheduled to appear during the three-and-a-half day session include: Ralph W. Phillips, Professor and Chairman of the Department of Dental Materials at Indiana University School of Dentistry; Dr. Miles R. Markley of Denver, Colorado and Dr. Walter T. Colquitt of Shreveport, Louisiana.

Dr. Cecil A. Pless, Jr., Chairman of the Scientific Exhibits Committee, reports that every effort is being extended to attract the very best in scientific exhibits from both state and national sources and that this year more emphasis will be given to

this phase of the program. To date, nine health agencies have accepted invitations to exhibit.

Housing Chairman, Dr. Richard S. Hunter, has indicated that applications for hotel accommodations will be mailed to the membership about the middle of February and an announcement of the exact date will be made in the Newsletter.

Entertainment Chairman, Dr. E. D. Baker, reports that he has already secured something novel in the way of entertainment which he is sure will make a hit with all who attend the 105th Annual Session.

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### **Hinman Clinic Scheduled**

Top authorities in the field of dentistry will serve as guest lecturers when more than 1,500 dentists from the Southeast congregate here Sunday, March 26, through Wednesday, March 29, for the annual Thomas P. Hinman Dental Meeting.

The four-day meeting, which serves as an annual post-graduate clinic for dentists, was founded in 1913 by the late Dr. Thomas P. Hinman, an illustrious dental pioneer in the South.

Invitations to the Clinic — now in its 49th year — have been sent to dentists throughout the United States. The lecture series is held at the Municipal Auditorium.

In addition to the outstanding lecture series, the meeting offers the finest technical dental exhibits in the South and a series of special events for wives who attend.

Dr. Charles H. Smith of Atlanta is president of the Fifth District Dental Society and Dr. A. E. Anderson of Atlanta, is chairman of the meeting.

### **Charlotte Auxiliary Sponsors Wheelchair Brigade**

The Charlotte Dental Auxiliary saw to it that aged people in the Queen City got their Christmas shopping done this year — by wheelchair.

A committee headed by Mrs. Grady Ross and Mrs. John Jordan worked out the details for the wheelchair brigade complete with a party-like lunch. On three successive days early in December groups of 40 wheelchair shoppers from the Methodist Home, with members of the Dental Auxiliary doing the “pushing,” toured the stores of Charlotte.

From one of the wheelchair shoppers who has seen many kind deeds done at Christmastime came this remark:

“It’s the most wonderful thing I’ve ever known anyone to do for old people. The people at the home have been so excited.”

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### **Epidemiology Survey Progresses**

A survey of dental diseases in North Carolina made possible by a grant from the National Institute of Health is progressing on schedule, according to Dr. John T. Fulton of the School of Public Health at the University of North Carolina.

Examinations in households in 90 of North Carolina’s 100 counties began about October 1, with public health dentists from the Division of Oral Hygiene making the calls in the late afternoons or evenings when the entire family is most likely to be at home.

Twenty-three public health dentists—16 from the Division of Oral

Hygiene and 7 from the county health departments of Buncombe, Forsyth, Guilford and Wake counties—underwent intensive training for the project at Chapel Hill August 15-26.

Directed by the Department of Epidemiology at UNC's School of Public Health, the study will assess the prevalence of dental caries, periodontal disease, oral debris and dento-facial handicaps in the people of North Carolina. Last summer the Research Triangle Institute de-

signed and drew an area sample of the state consisting of 500 units with an average of 4 households in each unit. These units were selected so that the population in urban, rural places and open country zones would be reasonably represented.

Dr. Fulton in his comments on the progress of the survey said that the co-operation and interest of the practicing dentists throughout the state was gratifying and will contribute much to the success of the study.

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## Obituaries

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**Dr. Alfred C. Current**, 64, of Gastonia, a past president of the North Carolina Dental Society and a State Life Member of the First District, died October 23, 1960.

**Dr. S. Robert Horton**, 80, of Raleigh, a past president of the North Carolina Dental Society and an A.D.A. Life Member of the Fourth District, died December 14, 1960.

**Dr. A. T. (Sandy) Jennette**, 54, of Washington, a member of the Fifth District, died October 9, 1960.

**Dr. Dallas Leroy Pridgen**, 65, of Fayetteville, a past president of the North Carolina Dental Society and a State Life Member of the Fourth District, died September 30, 1960.

**Dr. Charles Roberts Riddick**, 86, of Ayden, an A.D.A. Life Member of the Fifth District, died December 4, 1960 at Glen Burnie, Maryland.

**Dr. John Swaim**, 82, of Asheboro, an A.D.A. Life Member of the Third District, died September 28, 1960.

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### SPECIAL FEATURES ARE:

1. Up to a possible 7 years for each sickness (no confinement required).
2. Pays up to Lifetime for accident.
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All new applicants, and those now insured under age 55 and in good health, may apply for the new and extensive protection against loss of professional time due to sickness and injury.

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			<b>Annual Premium</b>	<b>Annual Premium</b>
5,000	5,000 to 10,000	50.00 Weekly	\$ 78.00	\$104.00
5,000	7,500 to 15,000	75.00 Weekly	114.00	152.00
5,000	10,000 to 20,000	100.00 Weekly	150.00	200.00
5,000	12,500 to 25,000	125.00 Weekly	186.00	248.00
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THE *Journal*  
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APRIL, 1961



VOL. 44, NO. 3

*Program Issue*

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# THE JOURNAL

## of

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(A Constituent of the American Dental Association)

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VOLUME 44

NUMBER 3

APRIL, 1961



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**The Journal of the North Carolina Dental Society  
Sincerely Dedicates This Issue to**



**RALPH D. COFFEY, D.D.S.**  
**Morganton, North Carolina**

Dr. Ralph D. Coffey was born in Yancey County, North Carolina, December 3, 1909. He attended Mars Hill College and was graduated from Atlanta-Southern Dental College in 1931. That was an important year, for that was the year he married Cecile Wing Wood, and came to Morganton to practice dentistry.

He served as president, vice president, and secretary-treasurer of the First District Dental Society. Later he was elected secretary-treasurer and then president of the North Carolina Dental Society. At the present time he is Speaker of the House of Delegates.

He is on the staff of Grace Hospital, the North Carolina School for the Deaf, and the Consulting Staff of Barium Springs Orphanage.

He is a past president and charter member of the Rotary Club. He served on the board of directors of the Chamber of Commerce and was chairman of the Burke County Chapter of the Boy Scouts of America. He is an elder in the Presbyterian Church.

Ralph has two children, Ralph Donald, Jr., and Anne Wing. Don is a graduate of Davidson College, and is presently a freshman at the UNC School of Dentistry. Anne is a high school senior.

Devotion to family and church, combined dedication to profession and community spell out Dr. Coffey's success in life.



DR. BUTLER

# The President's Page



As President of the North Carolina Dental Society I would like to say, "Thank you, one and all" for the many courtesies shown me personally and for all the good work done for our Society.

It would be impossible to carry on this mammoth program without the full co-operation of the Officers, the Central Office, the Committee Chairmen and others who have worked so diligently for the benefit of the North Carolina Dental Society.

An outstanding example is Dr. Riley E. Spoon, Jr., Chairman, and his Committee on Dental Care for the Aged, who have given so generously of their time and efforts to the Kerr-Mills Bill, which embraces the Amendments to the Social Security Act (P. L. 86-778). The NCDS House of Delegates, in special session, December 11, 1960, Pinehurst, passed a resolution favoring the implementation of Medical Aid to the Aged in our State. In view of the controversial issues of this legislation it has placed Dr. Spoon in a "pioneer position" which he has filled in a most commendable manner.

The scientific world is moving at such a fast pace that we must take advantage of every opportunity to become better dentists. Dr. Charles H. Teague, Program Chairman, has arranged to have some of the best men in the dental profession for our Annual Session, May 14-17. (See Program in this Issue.)

It has been a real pleasure, and I would like to thank you for the privilege and honor of serving the Society as Secretary-Treasurer, President-Elect, and President. To each of you my deepest appreciation and sincere gratitude for your wonderful co-operation.

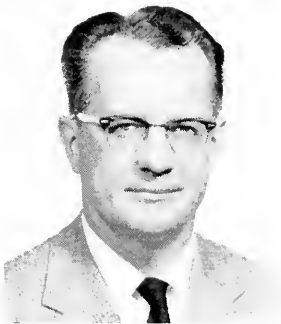
This year may well be a new year in dentistry, as history is truly being made.

I am looking forward to seeing you in Pinehurst!

Bring your wife (If you have one).

LUTHER H. BUTLER, D.D.S.

GREENSBORO  
MARCH 8, 1961



DR. ROSS

## *The President-Elect Speaks*



Do you have a dental friend that should be a member of our Society? The Secretary-Treasurer of your district will gladly help you make it easy for him to join. Each new member in organized dentistry strengthens both our profession and each individual in a positive way. Please talk to him and send his name to your Secretary-Treasurer.

There are many social and economic changes before us these days. Whatever you think about their decisions, please never feel that your House of Delegates or Executive Committee make their decisions quickly or lightly, without long consideration of all aspects of the thorny problems. Some of these decisions are made with many reservations, intermingled with hopes and fears of the future. The times seem to demand some changes in our fundamental thinking and actions.

Even the conservative, "middle of the road" approach may seem radical to those not as interested, informed, and aware as possible. It is a good time to be thinking ahead to the election of your district delegates, who ought to be true representatives of your best thinking.

And now is the time to plan to attend your district meeting (and others, as well) to enjoy the excellent programs, relaxing recreation and fellowship. Here is the schedule of district meetings. See you there!

First District—September 30-October 2, Grove Park Inn, Asheville  
Second District—September 24-25, Robert E. Lee Hotel, Winston-Salem  
Third District—October 29-30, Mid-Pines Club, Southern Pines  
Fourth District—September 18-19, Sir Walter Hotel, Raleigh  
Fifth District—September 17-18, Country Club, Greenville

NORMAN F. ROSS, D.D.S.

DURHAM  
MARCH 13, 1961





DR. TOWLER



## *From the Secretary's Desk*

- An organization may spread itself over the whole world, yet the average person will form his judgment of the organization through his contact with individuals.

Every member of our profession should learn as much as possible about the problems confronting the profession at the present time. Listen a great deal. Talk a great deal less. Study the over-all situation whenever possible and avoid coming to a decision when you don't know the whole situation. Do not be misled by logic alone. Most problems are loaded with emotion, too. Do not jump to conclusions about right and wrong. Make certain you understand the situation thoroughly before arriving at any decision.

When there seems to be no solution, drop the problem. Get away from it for a while. Then come back and tackle it again. It may suddenly become clearer. There is a tendency today for people to quit rather than win out over a seemingly hopeless situation.

Be realistic!

- The Detroit Rigger's local union in Michigan has opened and now operates a dental clinic, providing dental care for the Union's 750 members and 3,000 dependents.

- It is gratifying to learn that there is an increase of about 2 per cent in the enrollment of the 1960 freshman dental classes compared with a 1 per cent decrease in 1959. Let's continue the good work. They need our support.

- The stature of the dentist in the hospital is threatened. We need to place more emphasis on our professional and public relations. All persons must be made to realize that dentistry is an essential health service to everyone.

Only 2,300 hospitals out of 7,000 in the nation offer hospital dental care. The Dental Society should take the necessary steps to have all hospitals with 50 beds or more include dental services. Insurance companies are expanding their services to include more dental care and the hospital will be the place most of these services will be rendered.

S. BYRON TOWLER, D.D.S.

RALEIGH  
MARCH 10, 1961

# Editorials

## WHAT TIME IS IT?

It is the opinion of some that today's dental school graduate represents an investment of \$25,000 in professional training. Many educators estimate that by 1970 college costs will double. The laws of economics are beyond our control, but their effect is going to have an increasingly important role within the dental profession as time goes by. Increasing professional education costs are going to raise a two-pronged question (1) are fewer and fewer dentists going to be able to withstand the financial shock of educating their children in the professional field, and (2) will the monetary reward after graduation be sufficient to lure that potential graduate into dentistry?

We are all optimistic about the future. Along with our optimism, however, we must become increasingly realistic. Webster defines "realistic" as "being practical rather than visionary." How, then, can we become more practical in our practice of dentistry?

Previous editorials have dealt with individual practice problems to increase efficiency. It is safe to assume that many men in our state are now operating at an efficiency

level that cannot go higher until two laws on the General Statutes are changed. One forbids a qualified dental assistant to take X-rays in the dental office, and the second forbids a dental hygienist from giving topical fluoride treatments.

Compared with medicine, dentistry is a relatively young profession. Let's imagine what would happen to medical costs if medicine were shackled as dentistry is. How could a physician see as many patients as he does if he had to take every X-ray, EKG, and give every "shot"?

What would be the cost to the hospital patient if the physician were not free to diagnose, treat, and operate? What if he had to perform all duties that are now delegated to auxiliary personnel? It is easy to see that both patient and physician are benefited by controlled delegation of duty. The same would hold true with us.

Let us not think critically of our forefathers for the laws they put into effect governing the practice of dentistry. They had an excellent reason for every law, and they wrote them to best fit the need of their time. Times are changing,

however, and so are our needs.

The qualified dental assistant should be able to legally take X-rays. The registered dental hygienist should be enabled to apply topical fluoride. There are valid arguments for and against these proposals, but if the opposing arguments were balanced against each other, those for the change would certainly win. Let us enable ourselves to provide a better service for more people at a lower cost. Let us enable our profession to

better prepare ourselves financially to cushion the shock of providing our children a professional education. Let us continually strive to better the profession of dentistry so that it is a desirable profession from every standpoint for our young people to choose.

*"This time, like all times, is a very good one if we but know what to do with it."* Emerson.

C.C.D.

## A SOBERING CHALLENGE

Dentistry and medicine are losing the race for the finest and best qualified young men, while industry and government are attracting them through scholarships and other inducements. Never has there been a greater demand or more competition for capable young men in business, science and religion.

The American Dental Association, the American Association of Dental Schools, the Carolinas Section of the American College of Dentists and interested educational organizations are deeply concerned over the lack of qualified applicants to our dental schools.

Last year there were some one hundred thirty vacancies in the nation's forty-seven dental schools, the equivalent of closing three of them. In the face of an ever-increasing population and a public which is demanding more and better dental care, a critical situation is in the making for dentistry if it is to retain high standards of service and a position of leadership in the healing professions.

A recent survey by the American Council on Education revealed many things which have influenced young men to study dentistry. Freedom, prestige, economics, and service to mankind, plus an opportunity to operate with the hands, were high on the list. Parents were a major influence. Significantly, the survey also indicated that the family dentist was responsible for around fifty per cent of the dental students selecting dentistry as a career.

This is a challenge to our profession! Dentists must increase this influence to seventy-five per cent or more, by a concerted effort to select, interest and guide capable young men into dentistry. The stature and service of dentistry can never be greater than the men who choose it as a career.

As a dentist, you will find it a satisfying and rewarding experience to inspire young men to pursue dentistry by your example in the community, business, professional ethics and religion. However, this is not enough.

Dental vocational seed must be planted early in the minds of promising young men, as well as in the minds of their parents, pointing out the many opportunities dentistry affords. It is our responsibility to fully acquaint worthy young men with the many scholarships

and loan funds available to those who select dentistry as a career.

This is our challenge today!

H. ROYSTER CHAMBLEE, D.D.S.

EDITOR'S NOTE: *Dr. Chamblee is chairman of the Recruitment Program of the Carolinas Section, American College of Dentists.*

## COMPOSING A SCIENTIFIC ARTICLE\*

Students, particularly graduate students, are urged to read, but they seldom are taught to write. A time may arrive, though, when interesting and instructive material is available. A series of cases of an uncommon disease (at least three are needed) may stimulate you to write a paper. Perhaps you can present the results of original experiments, the conclusions of a research project, or the observations of unusual and different disease symptoms or signs which have escaped publication. Do not write a paper, however, unless you feel that its publication will be a significant addition to the literature and will benefit your professional colleagues and, indirectly, your fellow men. It is well, in addition, to review the literature on the contemplated subject before writing the article to determine whether or not your project will enhance or negate the findings of others.

You may have an urge to sit down and write the article in one evening, have it typed the next

morning, and rush it to the editor of an appropriate journal. Editors get far too many poorly written papers, and if you think it is their job to rewrite them you are mistaken. Do not expect an editor to do ghost writing. His task is to select good papers of interest to the readers of his journal, make minor changes in the text, and see to it that the accepted terminology is used.

The rewriting should be done by the author of the article. "Eine Arbeit muss verarbeitet werden" said one of my Swiss professors. A period of gestation is required. This, in the case of elephants, is two years; the human brain may do it more quickly. Before you begin to write, you should have a clear concept of what you want to say to the reader of your article.

First, clear the thoughts in your mind, ponder on the presentation of your material and how it should be shaped, and after careful consideration seize your pen and write. You may now write fully about the principal subject, and in a few hours have the *pièce de résistance*, the meat of your article, before you.

This is, however, only a draft, a beginning which may not be us-

\* Inspired by "How to Write an Article" by Peter Quince, *Perspectives in Biology and Medicine*, winter, 1959.

This editorial by Dr. Kurt H. Thomas is reprinted from *Oral Surgery, Oral Medicine and Oral Pathology*, 13: 1, 1960 with the permission of the author and The C. V. Mosby Company, St. Louis, publisher.

able in its present form, but you have benefited from exercising your mind. When rereading the thoughts which you have put down so far, you may find that your subject has opened in many directions. You may have strayed into unprofitable side lines. You may find that the article has to be completely revised; perhaps it should be scrapped and you should begin anew.

Put the paper aside for a few days and then read it again. Unnecessary discussions may be deleted, or you may want to add important new thoughts. Perhaps you will get stuck. Don't worry; time will be your ally. Sleep on it. Your subconscious may come to your rescue; forces stronger than you know may come to your aid. Thus, you may gather a lot more fragments which may be fitted in different juxtapositions so that you may have to consider entire paragraphs again and again. Have you fitted the parts together as you would a jigsaw puzzle? Are there gaps which need to be filled in? Is the picture clear, concise, well demarcated? Or are there fuzzy areas? You may find a certain amount of redundancy in your manuscript, and redundant statements should be eliminated. Hold on to the phrases which best express your idea — the ones that have punch.

Now we come to the reducing of the material. You may find examples of esoteric neologism, as you may have become involved in chronic logorrhea instead of presenting your material in simple language. Cut out a few dependent clauses; alter your punctuation, if necessary. Can't those three adjectives be replaced by one? Are there

ambiguous statements in your text? Are your statements too all-inclusive, too positive? Never say "cannot," and be careful if you say "always." Check the dictionary for the exact meanings of words and be sure to watch for common errors found in medical articles. Many authors use the words "the case" when they should say "the patient." Saying that the patient has a temperature means nothing; he may have a fever or a raised temperature.

A sigh of relief may be permitted at this time; you have worked hard. Take a rest and then read your text once again; even now, glaring imperfections which you would not have noticed a week ago seem to occur in many paragraphs and may mean additional work. Have you made a skeleton of your paper to see if it is properly organized and in logical sequence?

If reorganization is necessary to produce order out of chaos, it may be done with scissors and paste. Whole paragraphs can thus be relocated or a substitution glued into place. This, however, may take just as much time as a wearisome transcription.

The time has finally arrived to write the introduction and the conclusion to your article. The introduction should state why the article should be published, what new findings it contains, and how your findings differ from others already published. Do not fill pages with accepted facts and historical developments. Remember, you are not writing for students; you are addressing yourself to men of experience. There should be added a bibliography which lists authors who have published similar ma-

terial, and proper credit should be given, by means of accurate and enumerated references, at the end of the article in the manner customarily prescribed.

In most instances, a summary should be added to give those who are engaged in related fields a chance to see whether the article is of interest to them. In this should be stated the problems, the methods used to arrive at a conclusion, the results obtained, and the deductions made. Such a summary will also serve as a resume that can be used as an abstract by journals reviewing the current literature or translated into other languages.

Finally comes the time to try your article on the dog, or perhaps your wife is good natured and will allow you to read it to her. Be careful. If she majored in English, she may tear it apart again. Wives are out unless they can temper their criticism with praise — say, in the proportion of one to four. A senior author who may have his name attached to the enterprise should certainly be made responsible for the quality of the manuscript, but if you have no senior author as a collaborator, an expert in the field may be asked to review your masterpiece. Your reader may spot ambiguities, awkward sentence construction, and grammatical howlers. Take the criticism, make the final changes, retain your humility and good nature, and boy you have done well!

Thus, suddenly your paper is perfect and there is nothing more to be done, except to find a journal which will accept it. Remember, however, that the last word is spoken by the editor.

K.H.T.

## **BOOK REVIEW**

### **BOOK REVIEW ACCEPTED DENTAL REMEDIES**

*Compiled by the Council on Dental Therapeutics of the American Dental Association, 222 E. Superior St., Chicago 11, Ill. Twenty-sixth edition. 230 pages.*

For the dentist who has not been in contact with this publication for the past several years, a pleasant surprise is in store upon receipt of this book. The title is somewhat misleading and perhaps thought might be given by the A.D.A. to changing it.

The table of contents is very complete and self-explanatory. Some of the more important headings are: (1) Treatment Consideration of Patients Receiving Medical Care. Here the patient with a cardiovascular condition, the diabetic, hyperthyroidism, etc., are discussed briefly; (2) Treatment of Emergencies in the Dental Office; (3) Prescription Writing; (4) Local Anaesthetics; (5) General Anaesthetics; (6) Sedatives and Hypnotics; (7) Antibiotics; (8) Sterilization or Disinfection of Dental Instruments; (9) Nutritional Factors, etc.

*Accepted Dental Remedies* is an excellent manual for the busy practitioner. It is most complete in describing pharmaceuticals used in dentistry. This is one publication that should be in the office of every progressive dentist.

C. C. DIERCKS, D.D.S.

# Study Club Activities in North Carolina

BAXTER B. SAPP, JR., D.D.S.  
Statewide Study Club Committee

*A study club offers a person stimulation, drive, purpose, and pleasure which would be impossible to find by one's self. Dentists learned, even as they acquired their degrees, that "There is no such thing as something for nothing." "You must pay the price." A study club will make the price we pay to increase our knowledge, income, and happiness pay great dividends. The practice of dentistry depends upon study for continued professional development, and the study club is one excellent avenue for this pursuit.—join a club or form one.*

STUDY CLUB COMMITTEE

---

## **Piedmont Dental Study Club**

The club has missed a few meetings lately, but has come up with some good programs in spite of it. In January, Dr. C. E. Crandell presented an excellent program on "Hazards and Techniques in the Field of Radiodontics." The February program was presented by Mr. John Wheless of the Dentist's Supply Company on the "Four Harmonies of Esthetics," a subject devoted to full denture construction. The last meeting consisted of reports by various members on the national and regional dental meetings that had been held this year.

## **Ernest A. Branch Study Club**

Every four months this club meets for one or two days. At the last meeting Dr. Marion Ralls of Greensboro was elected Chairman of

the Projects Committee. The club will participate in the meeting of the South Carolina Dental Society in May. Later in the year they have planned a trip to Washington for a two-day visit to the Institute of Health and the Institute of Dental Research. Members of other study clubs are cordially invited.

## **Raleigh Dental Study Club**

"Better Dentistry Through Greater Knowledge," the trademark of a very fine group of dentists. They meet the second Tuesday of each month in the Armory of the 205th Medical Detachment in Raleigh. The membership is evenly divided between National Guard and civilian dentists. Sometimes physicians attend as guests. At the January 10 meeting, the club started on its present project, Practice Management.

Drs. T. E. Perry and M. P. Nicholson presented the essentials of the Professional Budget Plan. At the February meeting, Dr. Wes Kelley presented a program based on his experiences at the Chicago Dental Meeting.

### **Rough Butt Bald Dental Society**

At the last meeting ten members heard Dr. Cecil Pless give a report on the activities of the Mid-Winter meeting in Chicago. The Club heard a tape recording made by the Ernest A. Branch Study Club of an interview with Dr. Joseph C. Muhler on the subject of fluorides. Contact for this interview was made via the Bell Telephone System Speaker Phone, a unique device which permits a group to listen and ask questions of a clinician in some other part of the country. However, the device is not required by the clinician. A simple telephone is all that is necessary. The speaker phones are installed on any telephone by the telephone company on request. This type of program has met with a great deal of enthusiasm and will be used at the next meeting to interview a speaker on Practice Management. Congratulations on a marvelous bit of study club pioneering. New members taken into the club were, Drs. Joe Robertson, Tom Morris, Claude Sherrill, and Bob Holmes.

### **Charlotte Dental Study Club**

In March Dr. Ralph Campbell, Secretary of the American Academy of Dental Practice Administration, spoke on office personnel and developing a more proficient routine in dental practice. In April, Dr.

Hermann Becks, President of the American Academy of Dental Medicine, spoke on "Nutrition as it Applies to the Practice of Dentistry."

### **Piedmont Prosthetic Study Club**

The most recent meeting concerned technic work required of the students of the UNC School of Dentistry. On the same program Dr. Sandy Pike made a presentation on "Operatory Design and Instrument Layout as Related to Time and Motion Studies." The club has recently finished a project on full denture construction and is currently undertaking a project involving diagnosis, mouth preparation, and partial denture design.

### **Demeritt Pedodontic Study Club**

The club met in Kinston on December 14 with Dr. Donald Henson as host. The program consisted of an afternoon seminar conducted by Dr. Grover Hunter of the Department of Oral Pathology and Dr. Ted Oldenburg of the Department of Pedodontics, of the UNC School of Dentistry. The topic under consideration was "Periodontal Problems of the Child Patient." Following the seminar, Dr. W. L. Hand of New Bern presided at a dinner meeting. The club appeared on the program of the Florida Chapter of the American Society of Dentistry for Children.

### **Burlington Dental Study Club**

At the last meeting of the club Dr. Robert Sugg of Durham spoke to the group on "The Post Crown."



*This paper is being written in the interest of preventative Orthodontics. The opinions expressed here are neither entirely new nor are they being offered as a "sure cure" for breaking all thumb sucking habits. Instead, I am presenting some ideas that I have used and found to be successful. Since there is a relationship between this habit and one particular type of malocclusion, I think that by breaking the habit we may eliminate or, at least, reduce the severity of some orthodontic problems. The purpose of this paper is to discuss the effects of this habit of thumb or finger sucking and some methods of breaking the habit.*

# Thumb Sucking

## Thumb Sucking and Malocclusion

H. V. DAVENPORT, D.D.S.

It should be stated at this point that all children who have this habit do not have malocclusion. The amount of damage done to the teeth and jaws is in direct proportion to each of the following:

(1) The frequency the habit occurs.

(2) The amount of pressure exerted by the thumb or finger.

(3) The softness, pliability, or flexibility of the bony structures of the jaw.

(4) The duration of the habit in years.

---

### ABOUT THE AUTHOR

H. V. Davenport, D.D.S., is a graduate of Baltimore College of Dental Surgery and received an Orthodontic Certificate from the University of Pennsylvania. His practice in Hickory is limited to Orthodontics.



In this habit, the finger or thumb is usually placed against the lingual surface of the upper anterior teeth, or against the anterior part of the palate, exerting a pressure in an upward and forward direction. Simultaneously this same finger, or thumb, is exerting a force in the opposite direction against the lower jaw. The usual effect of this pressure is to cause a mis-shaping of the upper arch by bending, or forcing, the anterior portion and teeth forward, and, at the same time, causing a decrease in the width of the upper arch. At first the upper anterior teeth are forced forward, and later the upper posterior teeth drift forward. It is thought that the pressure against the lower jaw may cause a retrusion of that part. The final result is usually a protrusion of the upper anterior teeth, a deep bite, and all the upper teeth being too far forward in relation to the lower teeth.

### **Two Theories**

There are two different theories concerning the breaking of this habit, especially among pediatricians. One belief is that in breaking the habit, you produce an emotionally disturbed child. The other belief is that it is no worse than correcting some other fault of the child. One strong argument for breaking the habit is that it is unhygienic. Studies made recently show that such children have more colds and more communicable diseases. Most Orthodontists agree that it is best to delay any attempt to break the habit until the child is about two years of age. However, much success has been obtained in breaking and preventing the habit of very young children by

using a "sleeping bag" type gown or night clothing which prevents the finger or thumb from being placed in the mouth.

### **Breaking the Habit**

Before attempting to break the habit, there is the problem of educating the parent and the patient. This is most important, and, unless they both can be convinced of the importance of eliminating this habit and unless they are extremely cooperative, the procedure will result in the loss of time and effort. Very often the attempt to break the habit is unsuccessful because insufficient time is taken for a thorough educational period just because it is time-consuming. It should be stated definitely to the patient that what you are doing is not to punish him. Instead, it is being done to help him and for his benefit alone. If one can create a desire within the patient to break the habit the prognosis is very good. It should be remembered that the more convincingly you talk, the more successful your effort.

Several methods have been used to break this habit. In most cases it consists of placing something on the hands or finger, or in the mouth which produces an unpleasant sensation when the fingers are placed in the mouth. If the habit occurs only at night something placed on the finger usually works satisfactorily. This includes mittens, gloves or a medication which is painted on the offending part. The medication, which is obtained at any drug store, produces a burning sensation when placed in the mouth. Caution should be observed with this because it will also cause a burning sensation of the eyes if

they are rubbed with the fingers. When using any of these devices it is necessary to explain to the patient that since he is interested in breaking the habit, the device is being used just to remind him or help him break the habit.

### **Thumb Sucking Appliance**

For the younger and more persistent thumb sucker, an appliance placed inside the mouth and fastened to the teeth is usually more successful. This is a fixed type of appliance constructed of wires fastened to molar bands and cemented in place. One type consists of a wire crib or guard which is contoured to fit in the anterior part of the roof of the mouth. Since there is no contact between the two parts, the pleasure associated with the habit is eliminated. Since no pleasure is derived from the habit, the theory is that the habit will be discontinued. A variation of this appliance has several sharp wires which prick the finger when placed in the mouth. Since this is a mild form of torture it is usually used as a last resort. Even with this type of appliance the co-operation of the patient is necessary. It is not advisable to use any appliance or device forcefully or against the wishes of the patient. Instead, it is best to delay any sort of treatment, or preventative method, until some later time when the patient is in a more receptive mood.

In addition to the ones mentioned above, there are two others worthy of some recognition. There is the thumb guard which may be purchased in several sizes and is

laced to the thumb. Like some of the others it produces an unpleasant sensation. Probably the most recent and the easiest to prescribe is a "learn as you sleep" type recording, which is supposed to produce a subconscious action in suppressing the habit.

In treating any of these habits the willingness of the patient to be treated is important. None of the patients are exactly alike in reaction to treatment. Some require only a short period of treatment, others may revert to the habit after what appears to be a successfully treated case. Some may change from fingers on one hand to fingers on the other hand. As a rule it is best not to extend treatment over a period longer than six or eight weeks. If the habit is not broken in that length of time it is best to discontinue treatment for several months and then try again and at the wishes of the patient, only.

### **Summary**

All children who suck their thumbs do not have malocclusion. In breaking the habit, if the patient has a desire to break the habit the procedure is simple. All the patient needs is some sort of "reminder," such as a medication, a device or an appliance. It is best not to attempt to break the habit forcefully or without the co-operation of the patient. With patience, time and care the desire within the patient may sometimes be created or stimulated by the dentist.

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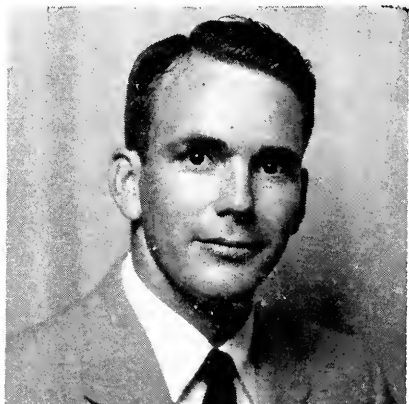


DR. GEORGIADE

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DR. QUINN

THE CORRECTION of mandibular prognathism should strive not only for cosmetic improvement but, also, for improvement in occlusal relationship of the dentition and relief of any temporomandibular joint difficulties which may arise from the malocclusion. Many operative procedures have been described that suggest various techniques for the correction of a Class III malocclusion, designated as mandibular prognathism, although we see many underdeveloped maxillas in the cleft palate patient that give the appearance of mandibular asymmetry. Up to a few years ago there were two main types used for correction of protrusion of the mandible. A one- or two-stage procedure has been widely employed for removal of a portion of the bone of the body of the mandible with maintenance of the integrity of the inferior alveolar nerve.<sup>1-5</sup> The second most popular type for correction of mandibular prognathism involved either intraoral, extraoral, or combined procedures for horizontal osteotomies in the midramus of the mandible.<sup>6-10</sup> Wiring of these fragments was also proposed to minimize the possibility of open bite and nonunion that results from anterior and upper displacement of the superior fragment of the ramus of the mandible after sectioning.

In the past few years we have followed with interest the apparent very satisfactory results obtained by a number of surgeons who describe variations of vertical osteotomies through the ramus of the mandible for correction of the deformity.<sup>11, 12</sup> After evaluation of their results and techniques, a modified vertical osteotomy is suggested by us for correction of the pro-

# Newer Concepts In Surgical Corrections\*

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trusive mandibular position. The use of a vertical osteotomy that extends from the coronoid notch down to the angle of the mandible, rather than a short osteotomy high on the condylar area, we feel, has many advantages and practically none of the disadvantages of the older procedures mentioned previously. Splinting of the bony fragments after section of the muscles of mastication, we feel, aids considerably in their eventual rapid healing of the osteotomy sites. Treatment postoperatively by means of intermaxillary wiring and fixation is all that has been found to be necessary for satisfactory stabilization of the mandible.

## Presurgical Procedures for Mandibular Prognathism

It is suggested that the following presurgical treatment is in order to maintain symmetry in positioning of the mandible in both a sagittal and

a horizontal position without opening the bite or increasing the mandibular plane angle and to minimize muscular disturbance (fig. 1A, B, and C).

1. Lateral radiographs are obtained in closed centric; anterior and posterior radiographs are obtained in closed centric; and photographs, orientated study models with a wax bite, in closed centric are also obtained, as well as a careful clinical evaluation.

2. Lateral radiographs in closed centric are traced and studied. A superimposed tracing of the mandible that maintains the initial mandibular plane angle is placed to correct the prognathism with the use of registration points, Sella turcica-Nasion, *point a* and *point b* (fig. 2A and B).

3. Oriented study models in closed centric occlusion are mounted upside down with the occlusal plane flat and the midpalatal suture at a

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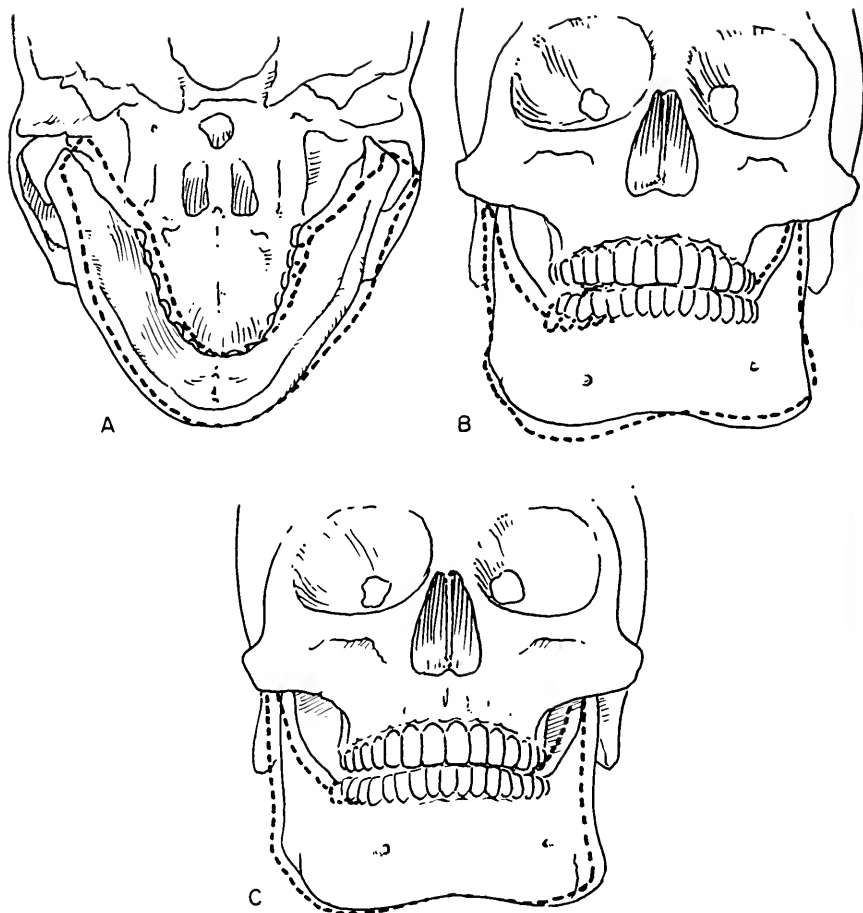


Fig. 1A. Ventral view of a mandible that demonstrates improper deviation of the mandible when only existing cuspal interdigitation is depended upon for future repositioning. B. Preoperative equilibration eliminates occlusal interferences that may cause unilateral or bilateral malpositioning of the mandible. Broken lines indicate possible deviation of the coronoid processes, interference with muscular balance, interference with lateral or protrusive excursions, and creation of further asymmetry of the face. C. Preoperative equilibration eliminates lateral deviation of the posterior portion of the mandible, which may result when only cuspal interdigitation is depended upon for future positioning.

right angle to the condyles on a Hanau articulator. The condylar paths and incisal guide planes are set at zero or flat.

4. A linear measurement on the lateral head film is made in the original closed centric position to the corrected position at *point b*. This point is used to enable future labiolingual axial positioning of

the anterior teeth to a healthier position, if necessary. Each articulator condyle is moved posteriorly with predetermined linear distance and set to insure symmetry of posterior movement. Re-examination of the new mandibular position is made for a change or acceptance. Occlusal interference that prevents the incisal guide pin from closing is

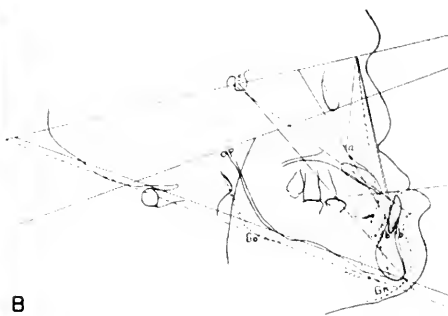


Fig. 2A. Oriented lateral radiograph of patient shown in figure 3. B. An oriented lateral radiograph is traced and postoperative position is determined. Broken lines indicate new position. Measurements are made from point b.

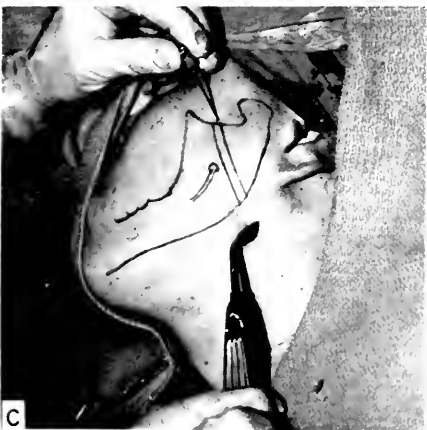
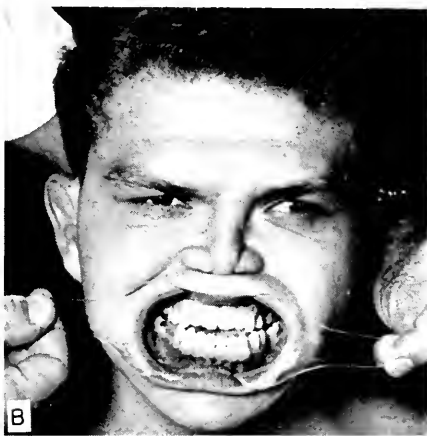


Fig. 3A and B. Lateral and occlusal views of patient with marked Class III malocclusion and associated congenital deformity of nose. C. Osteotomy site is indicated. Note positioning of needle in coronoid notch area. Because of amount of mandible necessary to overlap, a double cut is made in order to minimize overlapping. Saw cut is still made on an angle to increase surfaces of apposition post operation. D. Postoperative oral view, showing positioned, acrylic bite pattern wired in place.

studied. Interfering teeth are measured for clinical crown height before occlusal reduction is made and after occlusal reduction. Reduction is confined to one arch, if at all possible to simplify equilibration in the mouth.

5. When occlusal equilibration on the cast is completed, a wax bite of the teeth is made with the incisal guide pin closed. The wax bite is processed in a plastic, preferably acrylic, and tried on the mounted study casts for accuracy and adjustment.

6. The acrylic bite is transferred to the patient's mouth, one arch at a time. Teeth are reduced according to the pre-equilibration measurements on the study cast.

7. After surgical reduction, the

acrylic bite plate is placed over the occlusal surfaces and the arches are fixed by intermaxillary wiring.

Variations of the above-suggested procedures are as follows.

1. Preorthodontic treatment to level the occlusal plane

2. Postorthodontic treatment to reposition teeth and banding the teeth before surgery.

### Surgical Technique

Arch bars or orthodontic bands have been applied to the upper and lower dentition preoperatively.

A 3 cm.-curved incision is made in the inferior mandibular area in the submandibular shadow line below the angle of the mandible. Care is taken to preserve the in-

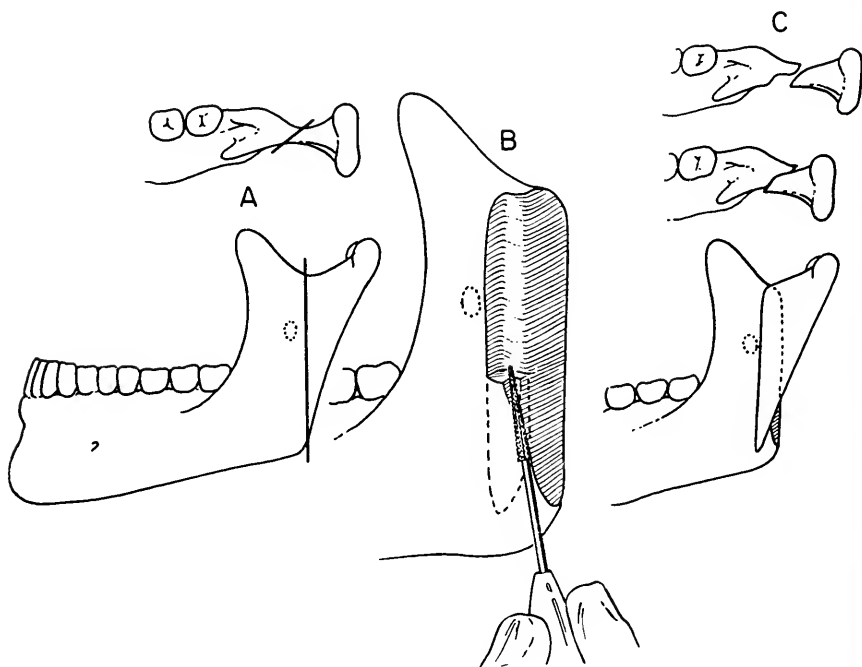


Fig. 4A. The osteotomy site and tangential saw cut is shown which is distal to the mandibular nerve and vessels. B. The cortex underlying the newly positioned distal ramus fragment is removed with a bone burr. C. Positioning of the fragments is shown after excess bony removal.



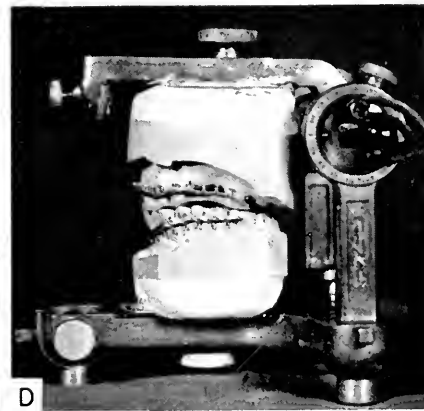
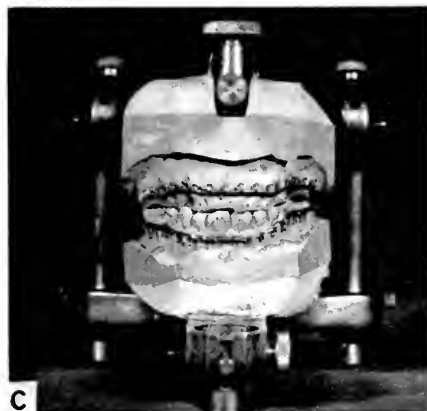


Fig. 5A and B. Shows unmounted study models of patient in figure 3. C and D. Study models of same patient are shown mounted on a Hanau articulator upside-down to facilitate equilibration.

tegrity of the mandibular branch of the facial nerve and the use of a nerve stimulator is suggested. Exposure of the inferior insertion of the masseter muscle is then made along the inferior border of the mandible, and the muscle and periosteum at the angle of the mandible are incised. The entire lateral ramus of the mandible at the angle is exposed with the use of periosteal elevators. Separation of the periosteum is extended up to the coronoid notch, and a needle is inserted externally through the coronoid notch in order to serve as a guide plane for the mandibular saw (fig. 3A, B, C, and D).

Sectioning of the mandible is facilitated by the use of a long nasal retractor so that direct vision of the

entire ramus of the mandible can be maintained during the osteotomy. Sectioning is easily performed by means of a specially designed mandibular saw. The cut is made on a bevel in the ramus from the coronoid notch to the angle in order to allow greater eventual contact area when repositioning the distal fragment over the proximal fragment. When only minimal sliding osteotomies are necessary to correct occlusal disharmony, one bone cut is sufficient bilaterally tangentially to attain this result. In the extreme mandibular prognathism, parallel mandibular cuts are made from the coronoid notch to the angle. This minimizes the amount of posterior section of bone which will be overriding (fig. 3C).

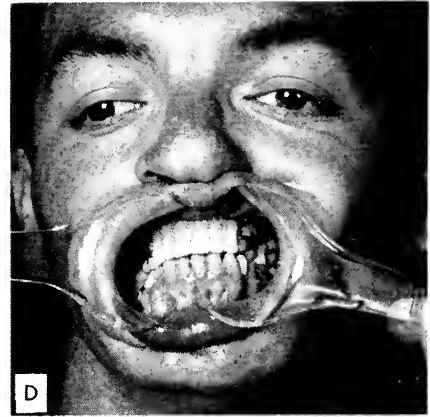


Fig. 6A and B. Preoperative photos of patient with severe maxillomandibular disproportion due to cleft of palate with associated disruption of maxillary growth. C and D. Postoperative views of patient after sliding angular ramus osteotomy.

After mandibular sectioning a better fit and, we feel, a more rapid healing of the cut fragments are obtained by removal of a portion of the cortical bone in the area in which the distal and condylar fragments override the anterior ramus portion. Cortical bone is easily removed by means of bone cutting burs. This also allows a much wider surface for repositioning and healing of the bony fragments with less flaring of the distal fragments (fig. 4A, B, and C).

The mandible is repositioned in its new, improved relationship and the teeth are then immobilized by means of intermaxillary 25-gauge stainless steel wires. Intramuscular antiemetic drugs are given at this stage.

The operative areas are closed bilaterally in layers with 4-0 chromic catgut sutures in the deeper layers and 5-0 plain catgut sutures subcutaneously, with 6-0 nylon sutures used to approximate the skin edges. A small rubber band

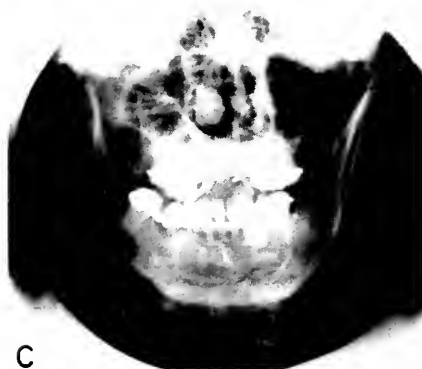
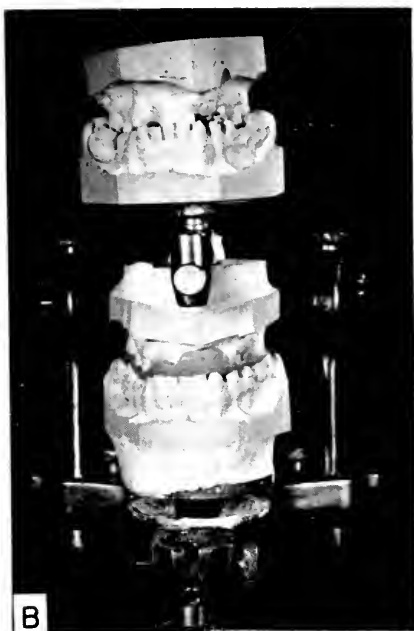
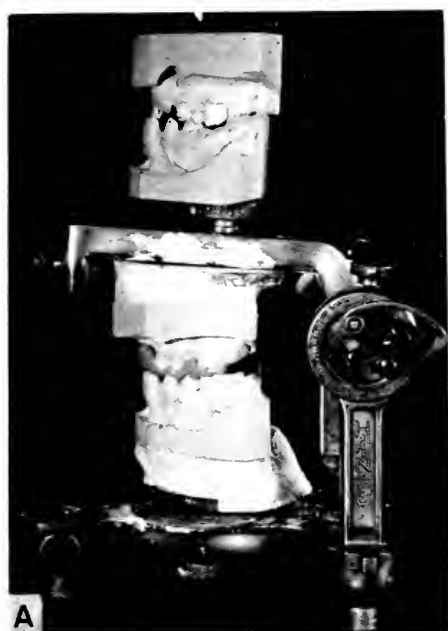


Fig. 7A and B. Mounted study models of patient shown in figure 6, with acrylic bite place positioned after occlusal equilibration. C. Three-month postramus osteotomy radiograph, that shows complete bony union of cut bony sections.

drain is inserted during the operative closure and withdrawn on the first postoperative day (figs 3,5,6, 7, and 8).

Immobilization is maintained for six weeks.

#### Summary and Conclusions

A short procedure is described which can correct mandibular pro-

nathism easily in one stage under direct visualization. Preoperative cephalometric studies, preoperative equilibration, and a preoperative bite add to the accuracy of repositioning the mandible in the desired horizontal and sagittal relationship, thereby reducing chances for muscular imbalance. By main-

taining the line of sectioning from the coronoid notch to the angle of the mandible, the cut is always distal to the inferior alveolar nerve and vessel and damage to these structures does not occur. Muscle imbalance and eventual open bite and nonunion have not been demonstrated in our patients. Utilization of small submandibular incisions

results in minimal postoperative scarring and an excellent cosmetic result.

*Acknowledgments.* We thank Dr. Kenneth L. Pickrell and Dr. John F. Lemler for their help with this paper.

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Fig. 8A and B. Pre- and postoperative lateral views of patient with moderate Class III malocclusion.

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# Clinical Consideration of Stannous Fluoride

*"The final appointment of your treatment plan should include a complete cleaning of the teeth and a topical fluoride application." Is this a familiar phrase in your presentation of a treatment plan to your patients?*

The search for a preventive treatment against dental caries is taking exhaustive man-hours in dental research. You can now, however, provide your patients with a caries preventive program which will render more satisfying results than ever before. You will acquire the sensation that the service you provide your patients will be of better quality. Dental research has made topical stannous fluoride the best anticariogenic agent available to the dental profession at this time.

The successful acceptance of stannous fluoride by dental practitioners has been due mainly to time saved in application and the increased anticariogenic levels attained. Three appointments are eliminated with this technique compared with the sodium fluoride method. This provides additional appointment time for patients waiting to receive dental services.

In attempting to implement a topical fluoride program in a dental practice, it is sometimes difficult to impress the full importance of com-

JAMES FRED SPROUL, D.D.S.

plete preventive dentistry upon a dental patient. Successful restorative dentistry is performed basically upon a foundation of sound preventive care, both by the dentist and the patient. Complete preventive care is difficult to attain, for there are many questions in this field that are not yet answered.

From the first recorded evidence of fluorides in 1901,<sup>1</sup> and its relationship to the teeth recorded in 1931,<sup>2</sup> there has been increased study to reveal the importance of fluorides as an anticariogenic agent. In 1947<sup>3</sup> the Council on Dental Therapeutics approved the use of topical fluorides as a caries preventive agent which has perhaps helped to lead investigation to a newer fluoride combination for topical application.

The recent arrival of stannous fluoride as a caries preventive agent is evidence of the increased importance of the role of preventive dentistry. Stannous fluoride is not the ultimate answer to complete caries control. It is one step further in the quality of care available to the dental patient and should be considered, in the total treatment plan, and as an adjunctive aid to preserve efforts devoted to restorative procedures.

### Clinical Considerations

Some dentists are probably hesitant in using a topical fluoride in their practice for one reason — pigmentation (or discoloration). This should not be confused with fluorosis, or mottling of the enamel of the teeth. First, let us recognize the fact that these two phenomena — mottling from excessive fluoride concentrations ingested from communal or local water systems, and

pigmentation occurring from the topical application of stannous fluoride, are entirely separate clinical manifestations.

Stannous fluoride pigmentation is the result of caries arrestment in either precarious lesions or active carious lesions. Fluorosis results from the ingestion of too high a concentration of fluorides, and presents either a chalky-white appearance, or yellowish brown to even black discoloration, depending upon the concentration of fluoride that is ingested during the growth stages of tooth formation.

The proper application of the fluoride to the teeth will accomplish three things: (1) Arrest active caries in the Class 2, 3, or 4 X-ray index of classification of caries progression until such time that these lesions may be restored; (2) Prevent incipient lesions, Class 1, from progressing into the above stages; and, (3) Protect the sound teeth by increasing their caries resistance through an ionizing exchange involving the enamel and the stannous fluoride. An article on *Stannous Fluoride Enamel Pigmentation* by Muhler<sup>4</sup> presents a finer view of this ionizing process and supports the fact that discoloration occurs with pre-existing carious lesions or precarious areas.

Evidence that pigmentation occurs where there is a precarious area is illustrated by Figure I. This photograph was taken one week following the topical application of the maxillary left quadrant only. The right quadrant did not receive the application. It is noted that the precarious areas, as illustrated by the labial surface of the right central incisor, are involved. The frequency of application to prevent

**FIGURE I**

One week following the topical application of stannous fluoride of one side only. Note the cervical third contrast of the maxillary anterior teeth.



further extension of the area, according to Muhler,<sup>5</sup> is determined by the rate that the pigmentation begins to disappear. Rampant caries represents that level of caries activity which loses the pigmentation most rapidly.

The effectiveness of a topical application of fluoride solution is shown in Figure II, which shows both precarious areas in the maxillary anterior region, and active carious lesions in the mandibular region. This case was observed for four years with no observable progressive change noted in the caries picture. Note that the left maxillary central has been restored with silicate but only for esthetic reasons. These photographs are not intended to discourage the use of stannous fluoride applications because pigmentation may occur. The dentist can generally predict discoloration after a clinical examination before the application of the solution.

At the present time there may be dentists that might question the value of a topical fluoride program where the communal water supply contains the optimal fluoride concentration. According to Jordan,<sup>6</sup> there are indications that the topical application of stannous fluoride

might aid in reducing dental caries, even in fluoridated areas. A recent study by Muhler<sup>7</sup> bears out these indications. These studies provide clinical evidence that patients receive additional caries resistance with topical stannous fluoride applications, even in areas where communal water supplies contain the optimal levels of fluoride.

#### **Advantages of Stannous Fluoride**

Before considering the use of stannous fluoride, the question might be asked, "Why is stannous fluoride superior to sodium fluoride?" The following advantages are based on a comparison with the knowledge of sodium fluoride for reference:

1. Only one application is needed, thereby eliminating 3-4 appointments at weekly intervals and providing valuable chair time for other patients.

2. Preservation of sound teeth with a higher anticariogenic level.

3. Less immediate expense to the patient due to an average smaller fee.

4. No lengthy procedures are involved.

5. Patient will accept preventive care more readily on consideration of time.

6. Concentration available for children (8 per cent) and adults (10 per cent).

7. Can be applied at yearly or, six month intervals, making it possible to treat the teeth as soon after they erupt to increase anticariogenic levels.

8. In many cases, incipient lesions, or Class 1, may not need be restored.

9. The progress of decay will be decreased until the teeth may be restored.

10. Less opportunity of ingestion of the fluoride with one application.

### **Disadvantages of Stannous Fluoride**

The use of stannous fluoride is not without disadvantages in the minds of some clinicians, and merits

consideration. Pigmentation, which has been discussed under the clinical considerations, is an undesirable result to some clinicians, but on closer examination, this can be a valuable indicator on the rate of caries activity in some cases. It could also serve as a determining factor on the frequency of application of the solution.

Stannous fluoride may elicit gagging during its application, and sometimes a sensation of nausea will occur after the application. This is due to the fact that the tin has an astringent action, and may produce a response of gagging or nausea.

### **Technique for Application**

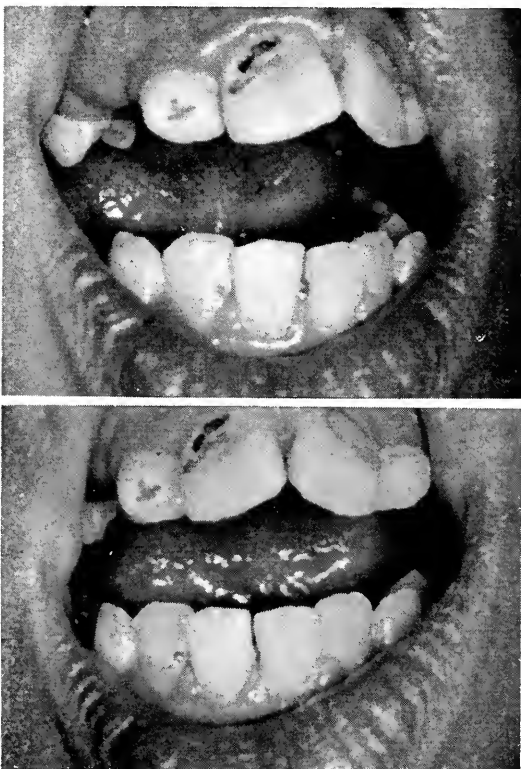
The technique for application of topical stannous fluoride will be classified into prophylaxis, isolation, mixing the solution and application. A discussion of each follows.

#### **Prophylaxis**

A thorough prophylaxis must be completed before the application of the stannous fluoride. The proximal areas of the teeth should be cleaned with sand paper strips or cotton dental tape with pumice to remove any plaque formations. The routine six-month check-up, or the first appointment of the newly acquired patient, is the best opportunity to introduce such a program. The time taken for a recall appointment averages 40 minutes, in which X-rays are taken, a clinical examination done, prophylaxis performed,

**FIGURE II**

The labial surface of one maxillary central was filled with resin. The other maxillary central was observed for four years before restoring it but only for esthetic reasons.





re-emphasis of correct oral hygiene, and the application of the fluoride solution with a reappointment given the patient, provided incremental caries require restorative care.

### **Isolation**

The success or failure of the stannous fluoride topical application depends upon adequate isolation of the teeth during the application. The teeth should be isolated in such a manner that the saliva will not contaminate the solution applied to the teeth during the application. The teeth must be perfectly dry before applying the solution. If, during the application, saliva contacts the area, the application must be started over.

Several factors determine how many teeth should be isolated for treatment, such as: (1) degree of salivation, (2) size of the mouth, (3) ability to open the mouth, (4) muscle tonicity, and (5) levels of frenum attachments. In the majority of cases, the Garmer cotton roll holder with a six inch cotton roll on the lingual side folded over the retromolar pad around to the facial surface of the maxillary teeth will be sufficient isolation to treat half the mouth. Figure III illustrates this isolation on both the adult and the child patient.

### **Mixing the Solution**

The solution should be prepared fresh for each patient. Fifty gram bottles of the stannous fluoride crystals are available with a double-ended spatula for correctly measuring of either an 8 per cent solution for children or a 10 per cent solution for adults. The crystals are dissolved in 10 c.c. distilled sterile water. Do not add flavoring or

coloring agents to the solution. The solution can be mixed in a measured glass bottle and placed in a disposable paper cup. A heavy metal, such as tin, is associated with an unpleasant astringent taste. It is best to warn the patient at this time of the taste to possibly prevent gagging during the application. Also, it is best to inform them that if any of the solution is ingested it will not harm them.

### **Application**

The solution is applied to the dry isolated teeth with a cotton tip applicator for four minutes, at approximately 15-30 second intervals. The patient is permitted to rinse the mouth once between each one-half mouth applications. The patient is instructed that they are not to eat, drink or rinse for the next half hour. To aid in applying the solution, some dentists prefer the patient taking an antisialogogue, such as, Bantheine — 50 mg, one-half hour before the dental appointment, to reduce salivary flow and reduce the possibility of contaminating the solution on the teeth during the application.

### **Summary**

National Dental Public Health statistics have established the fact that 95 per cent of our population is afflicted with dental caries. This prevalence of dental disease establishes the need of preventive measures, such as, a topical fluoride program in the dental office.

As a preventive measure to cope with the prevalence of dental decay, the clinical considerations of stannous fluoride indicate a marked advantage for its use due to, (1) saving valuable clinical time, (2)



FIGURE III

Isolation of one-half mouth of adult with Garmer cotton roll holders.

Isolation of one-half mouth of child with Garmer cotton roll holders.

cost, (3) patient convenience, and (4) an increase in effectiveness over sodium fluoride. The increased effectiveness of stannous fluoride over sodium fluoride has been noted by one study<sup>8</sup> to result in 21-26 per cent greater reduction in new caries lesions. The effectiveness of stannous fluoride can further be illustrated from a study, performed by a practitioner of pedodontics,<sup>9</sup> which indicated that a group of children benefited with a reduction of dental caries by about 60 per cent.

As originally stated, stannous fluoride is not the ultimate in caries control. It is recognized as an increase in the quality of service available to your dental patients. Stannous fluoride therapy can be effectively incorporated into a preventive dentistry program which includes good operative dentistry, practical advice on nutrition, and

good oral hygiene instruction. J. C. Muhler states<sup>10</sup> that there is much to be gained "by practicing multiple principles of preventive dentistry." 2658 OBERLIN ROAD  
RALEIGH

### References

1. McNeil, D. R., *The Fight for Fluoridation*. New York, Oxford University Press, 1957. Page 4.
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3. Muhler, J. C., Boyd, T. M., VanHuysen, G. *Journal of Dental Research*, Volume 29, 1950, Page 182.
4. Muhler, J. C., *Stannous Fluoride Enamel Pigmentation — Evidence of Caries Arrestment* Volume 27, Number 3, *Journal of Dentistry for Children*, Third Quarter, 1960, Page 160.
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6. Jordan, W. A., *Journal of American Dental Association*, Volume 6, Number 2, February, 1960, Page 191.
7. Muhler, J. C., *The Anticariogenic Effectiveness of a Single Application of Stannous Fluoride in Children Residing in an Area of an Optimal Communal Fluoride Area II. Results at the end of 30 Months*, *Journal of the American Dental Association*, Volume 61, Number 4, October, 1960, Page 38.
8. Muhler, J. C., Gish, C. W., Howell, C. L., *Journal of Dental Research*, Volume 36, Number 5, Page 785, October, 1957.
9. Rothhaar, R. E., *Topical Stannous Fluoride in a Pedodontic Practice* *Journal of Dentistry for Children*, Second Edition, 1960, Page 140.
10. Muhler, J. C., *loc. cit.*, Page 38.



# “On the local level...”

## FIRST DISTRICT

CECIL A. PLESS, JR., D.D.S., Editor

**The Buncombe County Dental Society** elected Dr. C. Don Gerdes of Asheville president for the ensuing year. Other officers are: Dr. William A. Mynatt, president-elect; Dr. Robert R. Hoffman, vice president; and Dr. Claude A. Sherrill, Jr., secretary-treasurer.

On February 7 the Society presented Dr. Earl Pound, a member of the University of California faculty, in a one day course on The Immediate Denture Problem.

**The Henderson County Dental Society** sponsored special dental health programs at meetings of Henderson County 4-H Clubs during the month of March.

New Society officers for 1961 include: Dr. W. F. Hargrove, president; Dr. J. G. Crowell, vice president; and Dr. Alexander Clark, secretary-treasurer.

At its January meeting, members of the Henderson group viewed a motion picture on endodontics.

**The Tri-County Dental Society** named Dr. Fred C. Shaw its new president for 1961. Completing the slate of officers are: Dr. Fletcher Clayton, vice president, and Dr. Clarence Canrobert, secretary-treasurer.

In January Dr. Dwight Clark of

the UNC School of Dentistry faculty spoke to the group on emergency procedures in the dental office.

Dr. C. Z. Candler of Asheville explained the details of a post-payment bank plan at the group's February meeting. Plans were made to institute such a plan in Hickory, Newton, Conover, Lincolnton, Taylorsville, Boone, Lenoir, and Morganton.

**The Isothermal Dental Society's** officers for 1961 are: Dr. R. G. Burrus, Jr., president; Dr. Yates H. Eaker, president-elect; and Dr. T. Hicks Hamrick, secretary. Guest speaker for the January meeting held in Rutherfordton was Dr. Graham of Spartanburg, S. C.

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## SECOND DISTRICT

O. J. FREUND, D.D.S., Editor

**The Blue Ridge Dental Society** met in January to hear Dr. C. E. Crandell, radiologist of the UNC School of Dentistry, speak on extra- and intro-oral technics.

**The Charlotte Dental Society** members were briefed on "Dental Jurisprudence" at a dinner meeting January 9. Richard M. Welling, Charlotte attorney, pointed out three dangers which could result in malpractice suits: (1) inattention to a patient; (2) failure to correct

a fault; and (3) discharging a patient who still needs attention.

The Society sponsored its annual all-day midwinter seminar February 10 with Dr. Earl Pound of Los Angeles as the main clinician. The seminar was scheduled in conjunction with the 13th National Children's Dental Health Week.

Dr. Marvin M. Sugarman, assistant professor in periodontics at Emory University School of Dentistry, was the principal speaker at the March meeting of the Society.

**The Forsyth County Dental Society's** February meeting featured Dr. Roy L. Lindahl of the UNC School of Dentistry faculty. Dr. Lindahl stressed the need for better public relations in dentistry.

Several books on dental education to be used in the local schools were presented to Dr. A. Craig Phillips, superintendent of schools, by the auxiliary in observance of National Children's Dental Health Week.

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### THIRD DISTRICT

B. B. SAPP, JR., D.D.S., Editor

**The Alamance - Caswell County Dental Society** elected Dr. T. D. Vollmer President for 1961. Other administrative officers are: Dr. Thomas Hinson, President-Elect; Dr. J. A. Foust, Vice President; and Dr. T. Edwin Evans, Jr., Secretary-Treasurer.

**The Durham - Orange County Dental Society** elected Dr. Clifford M. Sturdevant President for

1961. Dr. Tom Blum was named Vice President, Dr. Frank Daniel, Secretary and Dr. Charles Byerly, Treasurer.

Speakers on recent programs included: Dr. John Reckless of Duke University Medical Center, Mr. John Wheelless of Dentist's Supply Company of New York and Dr. John Lucka of Columbia University School of Dentistry.

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### FOURTH DISTRICT

J. HENRY LIGON, JR., D.D.S., Editor

**The Raleigh Dental Society** installed its 1961 officers January 9. They are: Dr. J. S. D. Nelson, President; Dr. R. R. Morrison, Vice President; and Dr. F. D. Bell, Secretary-Treasurer.

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### FIFTH DISTRICT

C. P. GODWIN, D.D.S., Editor

**The Pitt County Medical and Dental Society** is sponsoring a 12-installment course in psychiatry to be conducted by Dr. Hans Lowenback of the Duke University School of Medicine. The N. C. State Board of Health has appropriated \$1,500 to help finance the series of training sessions. The pilot training program is open to all members of the Society and credit for the course will be given participants by the American Academy of General Practice.

The Pitt physicians and dentists will award two \$500 scholarships to students now enrolled or planning to enroll in the School of Nursing at East Carolina College.

# Concerning Your Health and Your Income

## **The North Carolina Dental Society Group Accident and Health Plan**

### **SPECIAL FEATURES ARE:**

1. Up to a possible 7 years for each sickness (no confinement required).
2. Pays up to Lifetime for accident.
3. New Maximum limit of \$650.00 per month income while disabled.

All new applicants, and those now insured under age 55 and in good health, may apply for the new and extensive protection against loss of professional time due to sickness and injury.

Write, or call us collect (Durham 682 5497) for assistance or information.

### **Benefits and Rates Available Under New Plan**

Accidental Death Coverage	*Dismemberment Loss of Sight, Speech or Hearing	Accident and Sickness Benefits	COST UNTIL AGE 35	COST FOR AGES 35 TO 70
			Annual Premium	Annual Premium
5,000	5,000 to 10,000	50.00 Weekly	\$ 78.00	\$104.00
5,000	7,500 to 15,000	75.00 Weekly	114.00	152.00
5,000	10,000 to 20,000	100.00 Weekly	150.00	200.00
5,000	12,500 to 25,000	125.00 Weekly	186.00	248.00
5,000	15,000 to 30,000	150.00 Weekly	222.00	296.00

\*Amount payable depends upon the nature of the loss as set forth in the policy.

### **OPTIONAL HOSPITAL COVERAGE**

Available only to members who can furnish satisfactory evidence of insurability and are under 60 years of age. Renewable to age 70.

**\$10.00  
Daily Hospital  
Annual  
Premium  
\$20.00**

### **OPTIONAL SURGICAL COVERAGE**

For those under age 60 and in good health, a surgical operation schedule is also available, which provides payment from \$7.50 to \$225.00 depending upon the nature of the operation. The additional premium charge for this coverage is \$10.00 annually.

**ALL CLAIMS ARE PAID IMMEDIATELY FROM OUR OFFICE.**

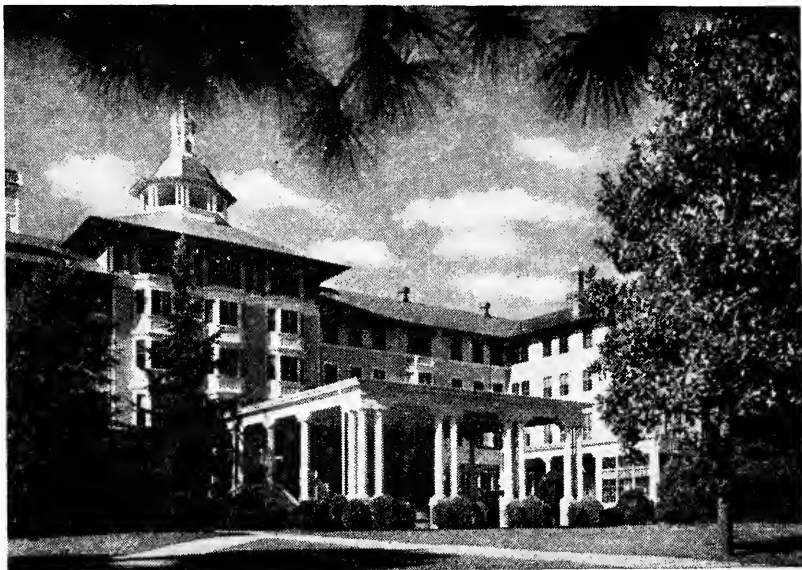
**Administered by**

**J. L. CRUMPTON, State Mgr.  
Professional Group Disability Division  
Box 147, Durham, N. C.**

**J. Slade Crumpton, Field Representative**

**This is our 18th year serving the North Carolina Dental Society**

**THE CAROLINA**  
PINEHURST, N. C.  
**WINTER GOLF CAPITAL**



**DURING THE SOCIAL SEASON AND FOR CONVENTIONS  
TOO—YOU ARE ALWAYS WELCOME**

**FOR TOURIST, AND TRAVELER ON  
VACATION — IT'S ALWAYS GOLF-TIME  
IN PINEHURST**

**IDEALLY SITUATED IN THE PINE COUNTRY  
OF THE CAROLINA SANDHILLS**

**DANIEL O. DELANY, MANAGER  
CLIFFORD F. SMITH, CONVENTION MANAGER**



*Preliminary  
Program*



**105th  
Annual Session  
North Carolina Dental Society**

**May 14, 15, 16, 17, 1961**

**THE CAROLINA**

**PINEHURST**



# 105th ANNUAL SESSION COMMITTEES

## Program Chairman

Charles H. Teague

## Convention Chairman

E. C. Schiebel

### Clinic

R. B. Barden, Chairman; Ralph L. Falls, Henry O. Lineberger, Jr., F. C. Slaughter, C. H. Sugg.

### Dental Assistants

C. A. Barkley, Chairman; Ralph L. Falls, Richard F. Hunt, Jr., Newton Smith, R. S. Turner.

### Dental Hygienists

A. Dwight Price, Chairman; J. Wayne Martin, Harold E. Plaster, J. G. Rehm, James M. Zealy.

### Entertainment

E. D. Baker, Chairman; Thomas G. Collins, Henry O. Lineberger, Jr., D. W. Seifert.

### Commercial Exhibits

W. Penn Marshall, Chairman; Charles T. Barker, D. F. Hord, Jr., John W. Menius, David C. Young.

### Golf

R. Bruce Warlick, Chairman; C. Z. Candler, Jr., Arthur Gollobin, C. R. VanderVoort, M. E. Walker.

### Hospitality

C. W. Poindexter, Chairman; John C. Brauer, H. E. Butler, Ralph D. Coffey, S. B. Towler, Zyba K. Massey.

### Housing

R. S. Hunter, Chairman; W. C.

Current, D. F. Hord, Jr., William H. Johnson, W. W. Umphlett.

### Monitor

R. A. Daniel, Jr., Chairman; John W. Atwater, Jr., Robert L. Daniel, W. H. Gray, Jr., Neal Sheffield, Jr., T. Q. Sneed, Jr., C. H. Sugg, C. T. Wells, Jr., W. K. Young.

### Necrology

Marcus R. Smith, Chairman; Boyce A. Brawley, Dewey Boseman, Daniel T. Carr, William D. Yelton.

### Program

Charles H. Teague, Chairman; R. B. Barden, Glenn Bitler, W. S. Peery, Pearce Roberts, Jr.

### Projected Clinics

W. Stewart Peery, Chairman; J. B. Freedland, M. G. Miska.

### Publicity

T. E. Sikes, Jr., Chairman; Walter H. Davis, Z. L. Edwards, Jr., Clyde Jarrett, Jr., C. W. Sanders.

### Superintendent of Clinics

T. L. Dixon, Chairman; Harry N. Baldwin, J. Wayne Martin, James E. Moser, Ledyard E. Ross.

### Scientific Exhibits

Cecil A. Pless, Jr., Chairman.

### Visual Education

Pearce Roberts, Jr., Chairman; Marvin R. Evans, R. J. Shankle.





## OFFICERS NORTH CAROLINA DENTAL SOCIETY

1960-1961

Luther H. Butler, D.D.S., Greensboro.....	President
Norman F. Ross, D.D.S., Durham.....	President-Elect
S. P. Gay, D.D.S., Greensboro.....	Vice President
S. Byron Towler, D.D.S., Raleigh.....	Secretary-Treasurer
C. C. Diercks, D.D.S., Morganton.....	Editor-Publisher
Andrew M. Cunningham, Raleigh.....	Executive Secretary

# General Information

## REGISTRATION

The registration desk will open at 1 p.m. Sunday, May 14, in the foyer of The Carolina. Members must present their ADA cards.

## GENERAL SESSIONS

There will be four General Session meetings: Sunday evening at 8:30, Monday morning at 9:30, Monday evening at 8, and Wednesday morning at 11:30. Everyone is cordially invited to attend all General Sessions except Monday evening when officers will be elected.

## HOUSE OF DELEGATES

There will be four meetings of the House of Delegates: Sunday afternoon at 3, Monday evening at 9, Tuesday morning at 9, and Wednesday morning at 10.

## COMMERCIAL EXHIBITS

The newest and latest in dental equipment will be on display on the West Porches of The Carolina. The exhibits will be open on Monday and Tuesday from 9 a.m. to 5 p.m. and on Wednesday from 9 a.m. until 11 a.m. This is a most important part of the meeting and you are urged to visit all the booths.

Free refreshments will be served in the Exhibit Area through the courtesy of the North Carolina Dairy Products Association, the Aberdeen Coca-Cola Bottling Company and the Seven-Up Bottling Company of Fayetteville.

## SCIENTIFIC EXHIBITS AND VISUAL EDUCATION

A number of scientific exhibits will be available for inspection in the Cocktail Lounge of The Carolina during the entire meeting. See list on page 217.

Four films on dentistry, in color and sound, will be shown. See schedule on page 217.

## GOLF TOURNAMENT AND DINNER

A Golf Tournament will be held Sunday on the beautiful Pinehurst Country Club Course. Teeing-off time is from 9 a.m. to 1 p.m. No entries will be allowed to start after 1 p.m. Scores must be turned in by 6 p.m. An entry fee of 75 cents will be charged.

Golf trophies will be awarded at the Golf Dinner at 7 p.m., Sunday, in the Crystal Room of The Carolina.

## SKEET SHOOT

A Skeet Shoot will be held at the Pinehurst Gun Club Sunday at 1:30 p.m. Trophies will be awarded to the best shots at the Golf Dinner, 7 p.m., Sunday in the Crystal Room of The Carolina.

# General Information

## **BANQUET, ENTERTAINMENT AND DANCE**

The annual banquet of the Society will be held Tuesday at 7 p.m. in the Dining Room of The Carolina.

The UNC School of Dentistry Chorus, under the direction of Dr. Roger E. Sturdevant, and Walter E. Vassar, Baritone, of Greensboro, will be presented in the Ballroom at 8:30 p.m.

A dance at 10 p.m. in the Ballroom with music by The Duke Ambassadors will conclude Tuesday night's festivities.

## **DISTRICT OFFICERS' CONFERENCE BREAKFAST**

All members of the District Officers' Conference will meet for breakfast in the Crystal Room at 8 a.m. Monday morning.

## **PAST PRESIDENTS' BREAKFAST**

All Past Presidents are invited to meet Tuesday morning at 8 a.m. for breakfast in the Crystal Room.

## **FOR THE LADIES**

A schedule of events has been planned especially for the ladies by the North Carolina Dental Auxiliary. See page 222.

## **FRATERNITIES**

Meet your fraternity buddies at the Fraternity Hour, Tuesday afternoon at 4 p.m. Delta Sigma Delta will meet in the Pine Room, Psi Omega in the Stag Room and Xi Psi Phi in Parlor 80, East Wing.

## **DRAWING OF PRIZES**

Several valuable prizes will be given to lucky winners at a drawing Wednesday morning at the close of the General Session. Only dentist-members are eligible and you must be present to win.

## **RECEPTION**

Members and their guests are cordially invited to a reception honoring the state officers and distinguished visitors, Tuesday at 5:30 p.m. in the Ballroom of The Carolina.

## **ALLIED MEETINGS**

American College of Dentists, Carolinas Section, Sunday, May 14, 1 p.m., luncheon, Crystal Room, The Carolina.

North Carolina Dental Assistants' Association, Hollywood Hotel, Southern Pines, May 13-16.

North Carolina Dental Auxiliary, The Carolina, May 14-16.

North Carolina Dental Hygienists' Association, The Carolina, May 15.

North Carolina Section, American Academy of Dental Medicine, Tuesday, May 16, 12 noon, luncheon, Crystal Room, The Carolina.

University of Maryland Dental Alumni, Monday, May 15, 12:30 p.m., luncheon, Crystal Room, The Carolina.

**NORTH CAROLINA DENTAL SOCIETY  
HOUSE OF DELEGATES**

**1961**

**Speaker of the House—Ralph D. Coffey**

**State Officers**

Luther H. Butler.....	President
Norman F. Ross.....	President-Elect
S. P. Gay.....	Vice President
S. Byron Towler.....	Secretary-Treasurer

**Executive Committee**

Riley E. Spoon, Jr.  
S. H. Isenhower  
Darden J. Eure  
W. B. Sherrod

**Ethics Committee**

G. L. Hooper  
A. C. Current, Jr.  
Thomas G. Nisbet  
H. Estes Butler  
Clyde E. Minges

**State Board of Health**

Z. L. Edwards

**State Board of Dental Examiners**

Horace K. Thompson  
S. W. Shaffer

**First District**

Dennis S. Cook  
A. T. Lockwood  
M. M. Forbes  
John W. Girard  
C. Z. Candler, Jr.

**Second District**

James A. Harrell  
L. C. Holshouser  
James E. Graham, Jr.  
W. Stewart Peery  
Robert A. George

**Third District**

W. P. Hinson, Jr.  
M. L. Cherry  
C. W. Poindexter  
J. T. Lasley  
C. H. Teague

**Fourth District**

T. G. Collins  
C. P. Osborne, Jr.  
L. D. Herring  
C. W. Sanders  
Marcus R. Smith

**Fifth District**

R. Fred Hunt  
Coyte R. Minges  
W. W. Umphlett  
C. B. Johnson (New Bern)  
R. H. Gilbert

# ADA Guest Speakers

**General Session**                      **Sunday**  
**8:30 p.m.**                              **Ballroom**

**GERALD D. TIMMONS**  
D.D.S., F.A.C.D.

Philadelphia, Pennsylvania  
Speaker, House of Delegates  
*American Dental Association*

Dr. Timmons is Speaker of the House of Delegates of the American Dental Association, a position to which he was elected in 1955, and has been renominated unanimously each year since. He has been dean of Temple University School of Dentistry since 1942.

He is a former chairman of the ADA Council on Dental Education and served as executive secretary of the ADA during 1940-42. Earlier he was a member of the Association's Board of Trustees.

He is a past president, secretary, and treasurer of the American Association of Dental Schools.



**DR. TIMMONS**

**General Session**                      **Sunday**  
**8:30 p.m.**                              **Ballroom**

**WILLIAM A. GARRETT, D.D.S.**

Atlanta, Georgia  
Trustee, Fifth District  
*American Dental Association*

Dr. Garrett is serving his first term as Trustee from the Fifth District of the American Dental Association. He has been in general practice in Atlanta since he was graduated from Atlanta Southern Dental College in 1919. He has been Professor of Practice Administration at Emory University School of Dentistry since 1947.

He holds the unique record of having served two years as president of the Georgia Dental Association and represented his native state in the House of Delegates of the American Dental Association for 15 years.



**DR. GARRETT**

## NORTH CAROLINA DENTAL SOCIETY

**Program****Sunday, May 14****A.M.**

**9:00 Golf Tournament**.....Pinehurst Country Club

**P.M.**

**1:00 Registration begins**.....Foyer

**1:00 Luncheon, American College of Dentists**.....Crystal Room

**1:30 Skeet Shoot**.....Pinehurst Gun Club

**3:00 House of Delegates, First Session**.....Bridge Room

**7:00 Golf and Skeet Shoot Dinner**.....Crystal Room

**8:30 First General Session**.....Ballroom

Necrology Service

Recognition of Guests

Report, William A. Garrett, D.D.S., Trustee ADA, Fifth District

Address, Gerald D. Timmons, D.D.S., Speaker of the House, ADA

**Monday, May 15****A.M.**

**8:00 District Officers' Conference Breakfast**.....Crystal Room

R. B. Barden, D.D.S., presiding

**9:00 Film "Audiac"**.....Ballroom

**9:30 Second General Session**.....Ballroom

Report: N. C. Dental Auxiliary

N. C. Dental Assistants' Association

N. C. Dental Hygienists' Association

Dental Foundation of N. C., Inc.

Address: Luther H. Butler, D.D.S., President, NCDS

**10:30 Evaluation of Newer Dental Materials and Technics, and Factors Affecting their Clinical Success**

Ralph W. Phillips, F.A.C.D., F.I.C.D.....Ballroom

**P.M.**

**12:30 Luncheon, University of Maryland Alumni**.....Crystal Room

**2:00 Film, "Operation Teamwork"**.....Ballroom

**2:30 Saving "Hopeless" Teeth**

Miles R. Markley, D.D.S.....Ballroom

**4:00 Everyday Crown and Bridge, Part I**

Walter T. Colquitt, D.D.S.....Ballroom

**8:00 Third General Session**.....Ballroom

Election of Officers

Selection of Site for 1963 Session

**9:00 House of Delegates, Second Session**.....Bridge Room

## NORTH CAROLINA DENTAL SOCIETY

**Program****Tuesday, May 16****A.M.**

<b>8:00</b>	<b>Past Presidents' Breakfast</b>	
	W. B. Sherrod, D.D.S., presiding.....	Crystal Room
<b>9:00</b>	<b>House of Delegates, Third Session.....</b>	Bridge Room
<b>9:00</b>	<b>Projected Clinics.....</b>	Ballroom
<b>10:00</b>	<b>Conserving Teeth and Tooth Structure With Emphasis on Improved Cavity Preparation for Amalgam</b>	
	Miles R. Markley, D.D.S.....	Ballroom
<b>12:00</b>	<b>Luncheon, N. C. Section, American Academy of Dental Medicine.....</b>	Crystal Room

**P.M.**

<b>1:30</b>	<b>Films: "Prescription Writing in Modern Dentistry"; "Mouth Preparation Before Removable Partial Denture Impressions".....</b>	Ballroom
<b>2:00</b>	<b>Everyday Crown and Bridge, Part II</b>	
	Walter T. Colquitt, D.D.S.....	Ballroom
<b>4:00</b>	<b>Panel Discussion on Endodontics.....</b>	Bridge Room
<b>4:00</b>	<b>Fraternity Hour and Committee Meetings</b>	
	Delta Sigma Delta.....	Pine Room
	Psi Omega.....	Stag Room
	Xi Psi Phi.....	Parlor 80—East Wing
<b>5:30</b>	<b>Reception for members and their guests.....</b>	Ballroom
<b>7:00</b>	<b>Annual Banquet.....</b>	Dining Room
<b>8:30</b>	<b>Entertainment .....</b>	Ballroom
<b>10:00</b>	<b>Dance .....</b>	Ballroom

**Wednesday, May 17****A.M.**

<b>9:00</b>	<b>Table Clinics.....</b>	Ballroom
<b>10:00</b>	<b>House of Delegates, Fourth Session.....</b>	Bridge Room
<b>11:30</b>	<b>Fourth General Session.....</b>	Ballroom
	Installation of Officers	
	Drawing of Prizes	
	Adjournment, sine die	

# Essayists



RALPH W. PHILLIPS, F.A.C.D., F.I.C.D.

Indianapolis, Indiana

Ralph W. Phillips is Professor and Chairman, Department of Dental Materials, Indiana University School of Dentistry. He is a University of Indiana graduate and holds an M.S. degree in chemistry. Widely known for research and scientific writing in the field of dental materials, he has appeared on more than 400 scientific programs throughout the country, including 38 state meetings and innumerable regional and national meetings.

**Monday, 10:30 a.m.**

**Ballroom**

## EVALUATION OF NEWER DENTAL MATERIALS AND TECHNIQS AND FACTORS AFFECTING THEIR CLINICAL SUCCESS

This presentation will bring the dentist abreast of the current status of many new materials and technics, emphasizing manipulative factors which affect their success. It will include: an evaluation of the rubber base and silicone impression materials and factors which affect their accuracy; recent research in amalgam restoration, including low mercury technics; marginal leakage of various restorative materials and the comparative ability of each to resist caries; cavity varnishes and bases; and the current status of resins. The clinical application will be continually stressed.

**Moderator: John C. Brauer, D.D.S.**

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WALTER T. COLQUITT, D.D.S., F.A.C.D.

Shreveport, Louisiana

A graduate of Atlanta-Southern Dental College, Dr. Colquitt is a general practitioner in Shreveport, Louisiana. He is a member of the American Association of Endodontists, the Southern Endodontic Study Group, the American Academy of Restorative Dentistry and the Southwestern Academy of Restorative Dentistry.



**Monday, 4:00 p.m.**

**Ballroom**

**Tuesday, 2:00 p.m.**

**Ballroom**

## EVERYDAY CROWN AND BRIDGE

A purely practical presentation by a general practitioner for general practitioners. The first phase will deal with such fundamentals as diagnosis, protection, and preservation of the pulp. The second phase will be a simple approach to the problems of crown and bridge service via hydrocolloid, assuring a minutely accurate result with a minimum of time and effort by both the patient and the operator. Closed mouth impression with check bite tray will be demonstrated. If time permits, porcelain jackets and post crowns from hydrocolloid impressions will be discussed and illustrated.

**Moderators:**

**Monday, 4:00 p.m.—H. Estes Butler, D.D.S.**

**Tuesday, 2:00 p.m.—Cleon W. Sanders, D.D.S.**



# Essayists

MILES R. MARKLEY, D.D.S., F.A.C.D.

Denver, Colorado

Dr. Markley received his dental degree from the University of Denver. He is a past president of the Colorado State Dental Association, the Colorado State Board of Dental Examiners and the Denver Dental Association. A lecturer and author, he is a member of the Academy of Gold Foil Operators and is civilian consultant in restorative dentistry to the Surgeon General of the Army and Air Force.



**Monday, 2:30 p.m.**

**Ballroom**

## SAVING "HOPELESS" TEETH

Teeth weakened by caries or over-cutting may be strengthened and dependably restored by a technic analogous to reinforced concrete architecture. Superior foundations for porcelain and cast restorations are possible, and are routine, for other than sound teeth. Solid teeth which have previously been considered hopeless or limited service risks are now restored dependably.

**Moderator: Norman F. Ross, D.D.S.**

**Tuesday, 10:00 a.m.**

**Ballroom**

## CONSERVING TEETH AND TOOTH STRUCTURE WITH EMPHASIS ON IMPROVED CAVITY PREPARATION FOR AMALGAM

Amalgam is the most used and most dependable of present restoratives. It serves best in a conservative cavity prepared to favor the properties of amalgam. The operator controls the destiny of his restoration by his understanding and attention to biological and technical details. This lecture is a course in sound restorative procedure.

**Moderator: Z. Vance Kendrick, Jr., D.D.S.**

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# Endodontic Panel

**Tuesday, 4 p.m.**

**Bridge Room**

## DIAGNOSIS, INSTRUMENTATION, FILLING OF ROOT CANALS AND PROGNOSIS

**Moderator: J. B. Freedland, D.D.S.**

Jesse A. Mitchell, D.D.S., Jacksonville, Florida

Robert A. Uchin, D.D.S., Fort Lauderdale, Florida

Julian A. Kelly, Atlanta Georgia

Time permitting, a question and answer period will follow the panel discussion.

# Table Clinics

**Wednesday, May 17, 9:00-11:00 a.m.**

**Ballroom**

- 1. The Immediate Partial—Space Maintainers**, Fred N. Ogden, D.D.S., Waynesville
- 2. Practical Use of Bite-Wing X-Rays in Daily Practice**, Milton S. Thurston, D.D.S. and C. F. Sherman, D.D.S., Salisbury
- 3. Check-Bite Impression Procedure**, W. E. Crow, D.D.S. and Bill J. Christian, D.D.S., Winston-Salem
- 4. Pedodontia for the Practitioner**, James B. King, Jr., D.D.S., Pittsboro
- 5. Crown and Bridge Procedures**, Baxter B. Sapp, Jr., D.D.S., Duke University Medical Center
- 6. Cold Polymerization Under Pressure, an Office Procedure**, H. Estes Butler, D.D.S., Greensboro
- 7. The Mandibular Lateral Incisor**, Galen W. Quinn, D.D.S., Duke University Medical Center
- 8. Appliance Therapy for the Correction of Crossbites in the Mixed Dentition**, Henry S. Zaytoun, D.D.S., Raleigh
- 9. Chairside Convincing Through Slide Projection**, R. H. Turlington, D.D.S., Clinton
- 10. Clinical Considerations of Stannous Fluoride**, J. Fred Sproul, D.D.S., Raleigh
- 11. Surgical Aids in Prosthetic Denture Construction**, Grover W. Smith, D.D.S., Kinston
- 12. Everyday Periodontics**, Capt. Charles Pridgen, D.C., USN, Camp LeJeune
- 13. North Carolina Dental Hygienists' Association**
- 14. North Carolina Dental Assistants' Association**
- 15. Children's Dentistry**, Carlton V. Winter, D.D.S., Charlotte
- 16. A Technique for Dental Transplants**, Jere E. Roe, D.D.S., Raleigh
- 17. One Sitting Root Canal Therapy**, O. R. Pearce, Jr., D.D.S. and M. W. Aldridge, D.D.S., Greenville
- 18. Endodontia**, R. J. Shankle, D.D.S., UNC School of Dentistry
- 19. Motivation**, Mett B. Ausley, D.D.S., Warsaw
- 20. Crown and Bridge**, James H. Lee, D.D.S., Mount Olive
- 21. Photo-elastic Stress Analysis of Class II Cavity Designs**, C. L. Sockwell, D.D.S., UNC School of Dentistry

# Projected Clinics

Tuesday, 9 a.m.

Ballroom

Moderator: W. Stewart Peery, D.D.S.

1. **Principles of Splinting as Applied to Periodontics**, Don L. Allen, D.D.S., U.N.C. School of Dentistry.
  2. **Esthetics in Crown and Bridgework**, Murry W. Holland, D.D.S., U.N.C. School of Dentistry.
  3. **Visual Aids Used in Teaching Removal of Lower Third Impacted Molars**, Dwight L. Clark, D.D.S., U.N.C. School of Dentistry.
  4. **Common Faults in Full Denture Construction**, David P. Dobson, D.D.S., U.N.C. School of Dentistry.
- 

# Visual Education

Monday and Tuesday

Ballroom

Monday, 9 a.m.

**Audiac.** Produced by the creator of audio-analgesia, Dr. Wallace J. Gardner, and the Ritter Co. Sound, color, 1960.

Monday, 2 p.m.

**Operation Teamwork.** An account of the day's activities of two dental assistants provides guidance for the dentist in the training and use of auxiliary personnel. Sound, color, 1959. San Gabriel Valley Dental Society.

Tuesday, 1:30 p.m.

**Prescription Writing in Modern Dentistry.** Sound, color, 1960. Produced by the Schering Corporation.  
**Mouth Impressions Before Removable Partial Denture Impressions.** Sound, color, 1959. Produced by the State University of Iowa.

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# Scientific Exhibits

Monday through Wednesday

Cocktail Lounge

1. **Cancer of the Head and Neck**, American Cancer Society.
2. **Role of the Dentist in Cancer Control**, American Cancer Society.
3. **Congenital Abnormalities and Their Oral Manifestations**, Lyon P. Strean, Ph.D., D.D.S., Norristown, Pennsylvania.
4. **The Intramucosal Insert: An Aid in Maxillary Retention**, A. Norman Cranin, D.D.S., Brooklyn, New York.
5. **The Erythromycins — Newer Concepts**, Robert S. Griffith, M.D., Marion County General Hospital, Indianapolis, Indiana.
6. **Dental Health Educational Materials**, American Dental Association.
7. **Fluoridation in North Carolina**, Division of Oral Hygiene, North Carolina State Board of Health.
8. **Antibiotic Protection of the Cardiac Patient**, North Carolina Heart Association.
9. **Food and Dental Care**, The Dairy Council Units of North Carolina.
10. **The Use of Closed-Circuit Television as a Teaching Aid**, University of North Carolina School of Dentistry.

# Commercial Exhibits

Monday & Tuesday, 9 a.m. to 5 p.m.

West Porches

Wednesday, 9 to 11 a.m.

You are urged to visit the commercial exhibits. These manufacturers, dealers, laboratories and other organizations will be represented by highly qualified people who can give you helpful hints to economical and intelligent buying.

<i>Firm Name</i>	<i>Booth</i>
Aberdeen Coca-Cola Bottling Company.....	33
Astra Pharmaceutical Products, Incorporated.....	17
Block Drug Company, Incorporated.....	61
Bosworth, H. J., Company.....	57
Bowen and Company, Incorporated.....	9
Buran's Dental Laboratory.....	16
Carolina Dental Supply Company.....	51
Caulk, L. D., Company.....	14
Cavitron Equipment Corp.....	39
Charlotte Laboratory, Incorporated.....	77
Deese Dental Laboratory.....	60
Densco, Incorporated .....	46 & 47
Den-Tal-Ez Chair Manufacturing Company.....	1
DentaPlane Corporation .....	78
Dentists' Supply Company of New York.....	36
Encore Power Division, Inc.....	39
Engelhard Industries, Inc., Baker Dental Division.....	52
Getz, William Corporation.....	32
Gray's Upholstery Co.....	30
Greensboro Laboratory .....	15
Jelenko, J. F., and Company, Incorporated.....	13
Johnson and Johnson.....	7
Justi, H. D., and Son, Incorporated.....	50
Keener Dental Supply Company.....	55
Kenton Pharmacal Company, Incorporated, Sal-Fayne Corporation Division.....	66
Kramer Dental Studio.....	53 & 54
Lactona, Incorporated .....	59
Lavoris Division, Vick Chemical Company.....	8
Lederle Laboratories of, Division American Cyanamid Company.....	58
Lippincott, J. B., Company.....	31
Medical, Dental, Scientific Photographic Company.....	12
Medi-Dent Professional Apparel Company.....	5
Midwest Dental Manufacturing Company.....	4
Merrell, William S., Company.....	72
National Cash Register Company.....	62 & 63

# Commercial Exhibits

<i>Firm Name</i>	<i>Booth</i>
Noble Dental Laboratory.....	34
North Carolina Dairy Products Association.....	East Porch
Oral B Company.....	68
PM Southeast, Incorporated.....	38
Pascal Company, Incorporated.....	18
Pelton and Crane Company.....	41 & 42
Powers and Anderson Dental Company.....	19 & 20
Premier Dental Products Company.....	49
Procter and Gamble Company.....	2
Professional Budget Plan.....	3
Raleigh Dental Laboratory.....	67
Richmond Dental Cotton Company.....	73
Ritter Company, Incorporated.....	22, 23, & 24
Robins, A. H., Company, Incorporated.....	48
Rocky Mountain Metal Products Company.....	21
Rothstein Dental Laboratories, Incorporated.....	70
Schering Corporation .....	69
Seven-Up Bottling Company of Raleigh, Incorporated.....	6
Sturgis, J. Minor.....	11
Squibb, E. R., and Sons.....	79
Sullivan Laboratories .....	35
Thompson Dental Company.....	25, 26, & 27
Universal Dental Company.....	64
Valtronic Corporation .....	40
Vivadent Corporation .....	10
Walker-Sizer Dental Company.....	45, 74, 75, & 76
Westlund Dental Studio.....	71
Whitehall Laboratories .....	37
Woodward Prosthetic Company.....	43 & 44
X-Ray Manufacturing Company.....	28-29

**Refreshments Will Be Served in the Exhibition Areas**

**Courtesy of:**

**ABERDEEN COCA-COLA BOTTLING COMPANY  
SEVEN-UP BOTTLING COMPANY OF RALEIGH, N. C.  
NORTH CAROLINA DAIRY PRODUCTS ASSOCIATION**



*"Hark the sound . . ."*

TUESDAY NIGHT . . . a night to remember!

7:00 p.m. Annual Banquet

8:30 p.m. The UNC School of Dentistry Chorus and Walter  
Vassar, Baritone

10:00 p.m. Dance

Music by . . .

**The Duke Ambassadors**

# NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION

## ELEVENTH ANNUAL MEETING

### HOLLYWOOD HOTEL, SOUTHERN PINES, NORTH CAROLINA

### MAY 13-16, 1961

#### PROGRAM

### Saturday, May 13

<b>P.M.</b>		
<b>5:00</b>	<b>Registration .....</b>	Main Lobby
<b>7:30</b>	<b>Meeting of Nominating Committee .....</b>	
<b>8:00</b>	<b>Meeting of the Board of Directors.....</b>	Ballroom

### Sunday, May 14

<b>A.M.</b>		
<b>8:00</b>	<b>Breakfast honoring Past Presidents.....</b>	Main Dining Room
<b>9:00</b>	<b>Registration .....</b>	Main Lobby
<b>10:00</b>	<b>First Session Business Body.....</b>	Ballroom

<b>P.M.</b>		
<b>1:00</b>	<b>Luncheon honoring guests.....</b>	Main Dining Room
<b>2:00</b>	<b>Registration .....</b>	Main Lobby
<b>2:30</b>	<b>General Session .....</b>	Ballroom
	Address of Welcome	Dr. Guy E. Pigford
	Response	Louise Primm
	"Dental Assisting as a Career"	Dr. Norman F. Ross
	"Ethics in the Dental Office"	Dr. Glenn L. Hooper
	"The Certification Program for the Future"	Edna Zedaker
	President's Address	Calyle Cromwell
<b>8:00</b>	<b>Meeting of the Board of Directors.....</b>	Paris Room
<b>9:00</b>	<b>Open House .....</b>	Holly Room

### Monday, May 15

<b>A.M.</b>		
<b>9:00</b>	<b>Registration .....</b>	Main Lobby
<b>9:30</b>	<b>Second Session of Business Body.....</b>	Ballroom
<b>11:30</b>	<b>Table Clinics .....</b>	Ballroom
There is no business session scheduled for Monday afternoon. There will be scientific exhibits and educational films at the meeting of the North Carolina Dental Society at The Carolina for those who wish to attend.		
<b>P.M.</b>		
<b>7:30</b>	<b>Banquet.....</b>	Main Dining Room
	Master of Ceremonies—Jerry Warner	
<b>9:30</b>	<b>Dance honoring President Calyle Cromwell.....</b>	Ballroom

### Tuesday, May 16

<b>A.M.</b>		
<b>9:00</b>	<b>Registration .....</b>	Main Lobby
<b>9:30</b>	<b>Third Session Business Body.....</b>	Ballroom
<b>11:00</b>	<b>Fourth Session Business Body.....</b>	Ballroom
	There will be a meeting of the Board of Directors following adjournment.	



Mrs. Towler  
Mrs. Byrd

Mrs. Abernethy  
Mrs. Walker

Mrs. Griffin  
Mrs. Hinson

## NORTH CAROLINA DENTAL AUXILIARY OFFICERS

1960-1961

Mrs. C. E. Abernethy, Raleigh.....	President
Mrs. S. B. Towler, Raleigh.....	President-Elect
Mrs. W. K. Griffin, Durham.....	Vice President
Mrs. Thomas H. Byrd, Jr., Raleigh.....	Recording Secretary
Mrs. Frank H. Walker, Yadkinville.....	Treasurer
Mrs. Thomas R. Hinson, Burlington.....	Historian
Mrs. H. O. Lineberger, Raleigh.....	Parliamentarian



# NORTH CAROLINA DENTAL AUXILIARY

## ELEVENTH ANNUAL MEETING

THE CAROLINA, PINEHURST, NORTH CAROLINA

MAY 14, 15, 16, 1961

### PROGRAM

#### Sunday, May 14

##### P.M.

1:00-5:00	Registration .....	Foyer
8:30	General Session, North Carolina Dental Society.....	Ballroom
	(Auxiliary members cordially invited)	

#### Monday, May 15

##### A.M.

8:30	18-Hole Golf Tournament.....	Pinehurst Country Club
8:45-9:45	Registration .....	Foyer
9:00	9-Hole Golf Tournament.....	Pinehurst Country Club
9:30	General Session, North Carolina Dental Society.....	Ballroom
	(Auxiliary members cordially invited)	
10:00	Bridge and Canasta.....	Bridge Room
11:00	Putting Contest for non-golfers.....	Pinehurst Country Club

##### P.M.

1:00	Golfers Luncheon.....	Pinehurst Country Club
2:00-3:00	Registration .....	Foyer
3:00	Executive Board Meeting.....	Bridge Room
4:00	Past Presidents' Meeting.....	Bridge Room

#### Tuesday, May 16

##### A.M.

8:15-9:15	Registration .....	Foyer
9:30	Brunch .....	Dining Room
	Honoring new members, wives of senior dental students, special guests.	
	(Carolina Hotel breakfast tickets honored)	
	Entertainment	
	Business Meeting	
	(To be admitted to brunch or any other Auxiliary activities, members must show membership card or Auxiliary name tag.)	

##### P.M.

5:30	Reception, North Carolina Dental Society.....	Ballroom
7:00	Banquet, North Carolina Dental Society.....	Dining Room
8:30	Entertainment .....	Ballroom
10:00	Dance .....	Ballroom

**NORTH CAROLINA DENTAL HYGIENISTS' ASSOCIATION**  
**ANNUAL MEETING**  
**MAY 15, 1961**

**PROGRAM**

**Monday, May 15**

**A.M.**

**8:30 Registration**.....Pine Room, The Carolina

**9:00 Call to Order**

**Invocation**—The Reverend Maynard Mangum, Pastor, First Baptist Church, Southern Pines, N. C.

**9:15 Roll Call and Reading of Minutes**

**9:30 Greetings**—Dwight Price, D.D.S., Chairman Advisory Committee to the NCDHA

**9:45 Panel Discussion**—"Diagnosis and Treatment of Periodontal Diseases as Pertaining to the Dental Hygienist"

J. W. Heinz, D.D.S., Charlotte

J. B. Howell, D.D.S., Greensboro

M. H. Truluck, D.D.S., Asheville

**10:45 Trustee Report**—Miss Alberta Beat, Trustee, District Six

**11:15 Business Session**—Committee Reports

**P.M.**

**12:30 Luncheon**.....Pinehurst Country Club

**2:30 Greetings**—Luther H. Butler, D.D.S., President, NCDS

**2:45 Lecture**—"The Role of the Dental Hygienists in a National Emergency"—Major William C. Hurt, Fort Bragg, N. C.

**3:30 Business Session**—Election of Officers

**4:30 Adjournment**



# General News

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## **New Dental Law Enacted**

A Society-sponsored bill to permit all registered dentists in North Carolina to vote for members of the North Carolina State Board of Dental Examiners was enacted into law April 12 by the North Carolina General Assembly.

The amendment to the General Statutes was sought by the Society's Legislative Committee at the direction of the House of Delegates.

The new law provides that election of Board members shall be conducted by the Board of Dental Examiners. Nominations will be by written petition signed by not less than ten dentists and the voting will be by mail ballot.

To be eligible for nomination, a dentist must be licensed and actually engaged in practice in North Carolina and must have been licensed for not less than nine consecutive years prior to his nomination.

The list of registered dentists maintained by the Board of Dental Examiners is to constitute the registration list for elections.

Previously, members of the Board were elected by the North Carolina

Dental Society and commissioned by the Governor.

Senator Dennis S. Cook of Lenoir introduced the bill in the Senate and Representative Frank M. Wooten, Jr., of Greenville presented the measure to the House.

The new law will apply immediately and two members of the Board will be elected under its provisions to begin their terms next August 1.

The current members of the Board of Dental Examiners and the years their terms expire are: Dr. J. Homer Guion and Dr. Horace K. Thompson, 1961; Dr. Wade H. Breeland and Dr. S. W. Shaffer, 1962; Dr. G. Shuford Abernethy and Dr. S. L. Bobbitt, 1963.

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## **Registration of X-ray Machines**

Dentists in this state are being asked to voluntarily register X-ray equipment in their offices with the State Board of Health, according to Dr. W. L. Wilson, Chief of the Board's Occupational Health Division.

Registration forms with an accompanying letter of explanation have been sent to dentists, Dr. Wil-

son stated. He explained that in 1959 the General Assembly passed a North Carolina Atomic Energy, Radio Activity and Ionizing Radiation Law authorizing the State Board of Health to adopt reasonable rules and regulations relating to the use, storage, transportation and disposal of radiation machines and radio active materials to insure the safety of all persons at, or in the vicinity of radiation equipment.

Information required on the registration form includes the name of the person owning the equipment, its location, serial number, make, model and kvp.

President Butler has urged dentists to cooperate in the program and return their registration forms promptly.

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## Enabling Legislation Proposed

Legislation to permit North Carolina to participate in a Medical Care



Dr. Riley E. Spoon, Jr., of Winston-Salem, Chairman of the Executive Committee and Dental Care for the Aged Committee.

for the Aged (MAA) program under the Kerr-Mills Bill will be submitted to the N. C. General Assembly with the support of medicine, dentistry, pharmacy and the hospital administrators in this state.

The bill will provide for the establishment of an advisory council composed of representatives of those health disciplines which will render medical and hospital services under the program.

Dr. Riley E. Spoon, Jr., Chairman of the Society's Committee on Dental Care for the Aged has represented organized dentistry on a multi-discipline committee headed by officials of the State Medical Society. This multi-discipline group drafted the legislation.

In December 1960 the NCDS House of Delegates reluctantly adopted a resolution supporting the implementation in North Carolina of provisions of P.L. 86-778 (Social Security Amendments of 1960) passed by the 86th Congress last September as a compromise measure for the Forand Bill.

At the ADA House of Delegates in Los Angeles last October, the Reference Committee on Legislation recommended that constituent societies participate actively in the implementation of the so-called Kerr-Mills Bill which provides additional federal matching funds to assist aged persons who are not recipients of O.A.S.I. benefits, and where resources are not sufficient to meet the cost of necessary medical care.

Under the new MAA program a state must provide some institutional and some non-institutional care and services. The program must be administered by the same agency which administers the

O.A.S.I. program. The North Carolina Department of Public Welfare administers the O.A.S.I. program in this state. Also, a state MAA program would have to provide reasonable standards for determining eligibility and the services offered must be on a statewide basis.

The Committee on Dental Care for the Aged estimates that 140,000 North Carolinians will be eligible for dental services under MAA. Sixty per cent (84,000) are estimated to be edentulous. Thus, 56,000 people will qualify for dental care, but the Committee estimates that only 20 per cent of them will seek dental treatment. This gives a net patient load of 11,200. Based on an annual cost of \$40 per person, a minimum dental program alone cost \$448,000.

The state would be expected to allocate \$51,000, the counties the same amount and the balance of \$345,000 would be provided by the federal government, since North Carolina is eligible to receive 77 per cent of the cost of the program from federal matching funds.

## **Sandy Marks Home**

Dr. Sandy Marks, Presbyterian dental missionary in the Congo, landed in New York aboard a Sabina airliner March 11.

Dr. Marks, formerly a practicing dentist in Wilmington, had planned to return to this country May 1 for a year's furlough, but events in the Congo forced him to return two months ahead of schedule.

Last fall Dr. Marks and his wife Kitty, fled in the face of violence and escaped unharmed to Southern Rhodesia. They both spent Christmas in Richmond and then Dr. Marks returned to his missionary

station in Lubondai where he has been serving as chairman of the Presbyterian mission group in the Congo.

In a short-wave radio message to his wife in Richmond on March 1 Dr. Marks indicated he had been packed for two days ready to leave if dangers increased. At that time, he said, his radio was the only one in operation in the area, all others having been confiscated by the Congolese.

His message said if he were not on the air the next day he would be gone, but he didn't say where. The prolonged silence after March 1, made Mrs. Marks fear foul play, probably in connection with the airplane in which Dr. Marks expected to make his escape.

But on March 10, Kitty breathed a sigh of relief when she received a cablegram which said he would arrive in New York the next day.

Dr. Marks had been serving as dentist to the missionaries in the Congo and established a dental school for the training of native dentists.

The Marks are making their home at 3505 Brook Road, Richmond 27, Virginia. Mrs. Marks will continue her studies at the Presbyterian School of Christian Education. Their daughter Katie will graduate from high school in June and will enter Mary Baldwin in the fall. Sandy, Jr., is a first year dental student at the UNC School of Dentistry, and son Stuart is a senior at N. C. State College and will receive his degree in wild life conservation next June.

Dr. and Mrs. Marks are planning to attend the 105th Annual Session of the North Carolina Dental Society May 14-17 in Pinehurst.



### Senator Cook

Senator Dennis S. Cook (D), of Lenoir is the only dentist in the 1961 North Carolina General Assembly. Dr. Cook represents the 28th District which includes Alexander, Burke, and Caldwell counties.

He is now serving his second regular term. He first came to Raleigh as the Senator from the 28th District in 1955 and also served in that capacity during the 1956 short term.

Dr. Cook is Chairman of the Senate's Public Health Committee and is a member of eight others: Constitution; Counties, Cities, and Towns; Financial; Manufacturing, Labor and Commerce; Penal Institutions; Public Welfare; State Government; and Wildlife.

He has been active in Dental Society affairs and was elected president of the First District Dental Society last fall.

While the General Assembly is in session Dr. Cook and his wife, Annabev, will spend Mondays through Fridays in Raleigh and commute to Lenoir for week-ends.

The Cooks have two children. Their daughter Carol is a freshman at Stephens College, Columbia, Missouri. Dennis, Jr., a third year dental student at U.N.C., is married and the proud father of a daughter, Marilyn Lee.

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### 34 N. C. TOWNS FLUORIDATE WATER

Over one-half the urban population in North Carolina are now drinking fluoridated water from municipal water supplies, according to statistics released by the Division of Oral Hygiene of the N. C. State Board of Health.

Thirty-four towns now adding fluoride to their water supplies serve a total of 1,036,507 people.

Charlotte was the first city in North Carolina to fluoridate its water in 1949. On February 23, 1961, Goldsboro began operating its fluoridation equipment to become the 34th community to take advantage of this safe, effective and economical method of reducing dental caries.

Seventeen North Carolina towns are served by water supplies which have a natural fluoride content of 0.7 ppm or more. They are: Ayden, Bailey, Belhaven, Edenton, Farmville, Hamilton, Littleton, Plymouth, Powellsville, Rich Square, Robersonville, Tabor City, Wentworth, Williamston, Windsor, Wintont, and Wise.

## New Group Insurance Plan Offered

A low cost, "around the clock" accidental death and dismemberment coverage is now available to members of the North Carolina Dental Society. This new protection was recommended by the Insurance Committee and approved by the Executive Committee.

Under this plan Society members may purchase any amount of insurance from \$10,000 to \$100,000 at a rate of \$1 per thousand. The average cost of similar coverage under non-group plans is \$2.35 per thousand.

In announcing the plan, Dr. E. L. Eatman, Chairman of the Insurance Committee had this to say: "Recent years have brought about tragedies among some of our members and because of this it was felt by your Insurance Committee that a group Accidental Death and Dismemberment Policy would be most desirable. Some members undoubtedly have some form of accident insurance. Some buy trip travel insurance at vacation time or patronize the coin-operated accident policy machines when taking a plane trip. These policies become expensive during the year and do not compare with a group plan.

"With this in mind, your Insurance Committee has approved and adopted and highly recommend that you purchase the 'Around the Clock' low cost Accidental Death and Dismemberment Policy now available through the Insurance Company of North America and administered by Moore and Johnson Company of Raleigh."



## CHILDREN'S DENTAL HEALTH WEEK in A. C. Bulla Health Center

In observance of National Children's Dental Health Week, Dr. Fred Sproul, Wake County Public Health Dentist, was host to a class of fifth graders from Longview Gardens Elementary School at his dental quarters in the new A. C. Bulla Health Center in Raleigh.

Special dental exhibits were on display and a film on good dental care was shown.

Every child who came to see the dentist that day was given a tooth brush and big red apple.

## Keogh Bill Reintroduced

H.R. 10, the so-called Keogh Bill to provide tax benefits to self-employed persons in connection with retirement plans, has been reintroduced into the 87th Congress.

The newest version of the Keogh Bill — officially titled the "Self-Employed Individuals Retirement Act" — embraces a somewhat different approach than in prior Congresses. Instead of allowing the self-employed a limited tax deduction for amount voluntarily set aside for their retirement either in restricted trusts or insurance or annuity policies, the present H.R. 10 adopts the general form of the Senate Finance Committee Bill of the 86th Congress which would have brought self-employed persons under existing legislation relating to non-discriminatory, tax-favored private retirement plans, by allowing them to be treated as their own employers and employees.

### Changes in New Bill

The new Keogh Bill, however, makes a number of important changes over the Senate draft: (a) it eliminates all proposed restrictions on corporate pension plans covering so-called "owner-employees"; (b) it does not require a self-employed person to include his employees under the plan unless they are more than three in number (excluding part-time or seasonal employees); (c) it modifies the severe limitations of the Senate bill on the amount of contributions which can be made on behalf of owner-employees (i.e., sole proprietors and partners having more than a 10 per cent interest in the business); and (d) it bases the self-employed individual's contribution

on the amount of his "self-employment earnings" rather than on his "earned income" from the business.

## Prepaid Dental Care on Increase

Programs providing for the planned purchase of dental care, a relatively new method of financing dental treatment, are increasing rapidly in the United States, according to a study made by the Public Health Service, U. S. Department of Health, Education, and Welfare.

The 128 prepaid dental care plans in operation in 1960 represent a 40 per cent increase since 1958. Over the same period, the number of people covered by plans offering some restorative service as a benefit jumped from 350,000 to 580,000.

Unions, employers, employee associations, and combinations of these are the principal sponsors of dental prepayment plans, the report indicates. Nearly 90 per cent of the plans surveyed were operated by such groups.

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## Obituaries

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**Dr. Alonso J. Pringle**, 63, of Kernersville, a member of the Second District, died January 15, 1961.

**Dr. Bernard N. Walker**, 51, of Charlotte, a past president of the North Carolina Dental Society and a member of the Second District, died March 7, 1961.

**Dr. Charles M. Wheeler**, 76, of Greensboro, an A.D.A. Life Member of the Third District, died February 3, 1961.



## Heart Association to Meet

The North Carolina Heart Association will hold its annual scientific session May 24 at the Robert E. Lee Hotel in Winston-Salem. The all-day program includes papers by Dr. Samuel Mellet, University of Pennsylvania; Dr. George Morris, Baylor University; and Dr. Irvine Page, Cleveland Clinic.

A Clinico-Pathological Conference is also scheduled with Dr. Eugene A. Stead, Jr., of Duke and Dr. Robert Prichard of Bowman Gray School of Medicine participating.

Members of the North Carolina Dental Society are especially invited to attend, according to Mrs. Mary Nies, Public Relations Director of the Heart Association.

## AADM Announces Cruise

The American Academy of Dental Medicine will hold a Cruise Convention on board the luxury liner, S.S. Ocean Monarch, to Bermuda and Nassau, over the Memorial Day Week-end, May 26-June 3, 1961, combining a comprehensive scientific session with a program of recreation.

All interested dentists and physicians as well as members of the Academy and their families are welcome. For details and reservations address Dr. Howard Ward, General Chairman, 15 Bond Street, Great Neck, N. Y.



R<sub>x</sub> for caries-active patients



**SUGARLESS "SWEETS"**



**NON-CARIOGENIC MINTS**

*Mint, Lime, Clove, Wintergreen, Wild Cherry, Choco-Drops and Licorice. Also Sugarless Fruit Drops and Cough Drops.*

**NON-CARIOGENIC GUM**

*Peppermint, Spearmint, Fruit, Cinnamon, Clove, Grape and Licorice*



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**Announcing**

## **A HIGH LIMITS Accidental Death and Dismemberment Policy**

*Now members of the North Carolina Dental Society can, through a special arrangement with the underwriters, purchase Accidental Death and Dismemberment coverage far in excess of the amount that can be purchased under the usual plans—and at a greatly reduced price.*

*You may select any amount of death benefit (Principal Sum) you want—any multiple of \$5,000, (minimum: \$10,000; maximum: \$100,000), at the special group-based rate of \$1.00 per \$1,000 per year. Members may purchase this protection regardless of health history. Your coverage will become effective on the first day of the month following receipt of your application by the Company.*

For brochure and application, write—

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**INSURANCE COMPANY OF NORTH AMERICA**

# **for members of the North Carolina Dental Society**

## **OUTLINE OF THE PLAN**

The plan covers 24 hours a day—365 days a year—world-wide—traveling or at home—accidents on or off the job. It includes broad air travel (as a passenger only) in any aircraft except (1) a plane owned or leased by your employer; (2) planes used for experiments; or (3) military planes with the exception of MATS.

The policy does not cover intentional self-inflicted injury; loss due to act of war; or while serving in the armed forces (your unearned premium would be returned).

### **BENEFITS**

The plan covers the following losses, resulting from, and occurring within one year of, the accident.

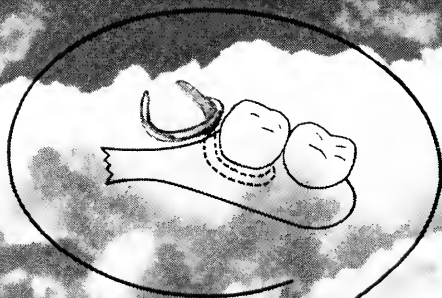
Life.....	the Principal Sum
Two or more members.....	the Principal Sum
One member.....	One-half the Principal Sum
Thumb & Index finger of same hand	
	One-quarter the Principal Sum

(Member means hand, foot or eye. Not more than the largest benefit is payable for all injuries suffered in one accident. Thus, for loss of one hand, and thumb and index finger of the other hand, one-half the principal sum would be paid.)

### **TERMINATION**

The Company's right to refuse renewal of your policy is limited to (1) when you become 70 years of age; (2) when you retire or cease to be an active member; (3) when you fail to remit the premium; or (4) unless the Company declines to renew the insurance of all those in your organization who enroll under the plan.

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THE *Journal*  
OF THE NORTH CAROLINA DENTAL SOCIETY

AUGUST, 1961



VOL. 44, NO. 4

*Transactions 1960-1961*

### NOTE

In accordance with a change in policy, the Roster of Members usually included in this issue will be published in January 1962 and every January thereafter.

THE JOURNAL  
of the  
North Carolina Dental Society

A Constituent of the American Dental Association

*Containing the*  
TRANSACTIONS  
*of the*  
SPECIAL SESSION

THE CAROLINA — PINEHURST, NORTH CAROLINA

December 11, 1960

*and the*

105th ANNUAL SESSION

THE CAROLINA — PINEHURST, NORTH CAROLINA

May 14-17, 1961

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VOLUME 44

AUGUST, 1961

NUMBER 4

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## OFFICERS 1960-61

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NORMAN F. ROSS, D.D.S., <i>President-Elect</i> .....	Durham
S. P. GAY, D.D.S., <i>Vice President</i> .....	Greensboro
S. B. TOWLER, D.D.S., <i>Secretary-Treasurer</i> .....	Raleigh

## SPEAKER OF THE HOUSE

RALPH D. COFFEY, D.D.S.....	Morganton
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## EDITOR-PUBLISHER

CLINTON C. DIERCKS, D.D.S.....	Morganton
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## EXECUTIVE SECRETARY

ANDREW M. CUNNINGHAM.....	Raleigh
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# TRANSACTIONS

Special Session

## HOUSE OF DELEGATES

### North Carolina Dental Society



THE CAROLINA

Pinehurst, North Carolina



December 11, 1960

# Committee Reports

STANDING AND SPECIAL  
(In alphabetical order with action  
by House of Delegates)

## COMMITTEE ON RULES AND ORDER

**Speaker of the House:** The Constitution and Bylaws as amended in 1960 provides that: "The Speaker of the House shall preside at all meetings of the House of Delegates and shall determine the order of business for all meetings subject to the approval of the House of Delegates, and shall perform such other duties as custom and parliamentary usage require. The decision of the Speaker shall be final unless an appeal from such decision shall be made by a member of the House, in which case final decision shall be by majority vote."

The above provision is interpreted by this Committee to include the authority of the Speaker to appoint a parliamentarian and such committees of the House deemed necessary to expedite the business of the House. Further, the committee recommends that the Speaker be granted a vote only in case of a tie.

**Adoption of Agenda:** The Committee submits the attached agenda for the Special Session of the House of Delegates, and recommends its approval as the official order of business.

**Voting Procedures:** The method of voting in the House will usually be indicated by the Speaker in the call for the vote: voice vote, hand vote or rising vote. When a rising vote is called for, delegates are asked to remain standing until the count has been completed and the Speaker indicates that the voters may be seated.

**Recognition of Those Wanting to Speak:** When a member wishes to address the House, he should secure the attention of the Speaker, and not begin to speak until he has been recognized by the Chair. He should then state his name and his district for the benefit of the recorder.

If a member intends to introduce a resolution, he will be asked to come to the rostrum and speak into the microphone so that it can be recorded on tape.

**Access to the Floor:** Access to the floor of the House will be permitted only to Delegates, Officers and Staff. Alternate Delegates and members of the Society will be seated in a special section in the rear of the House.

**Attendance of Representatives of the Press:** Members of the House will wish to be guided in their deliberations and debate by the knowledge that representatives of the press may be in the visitors gallery.

**Rules of Order:** Robert's *Rules of Order* will govern the deliberations of the House of Delegates in all cases in which they are applicable and not in conflict with the Bylaws.

**Amendments to Constitution and Bylaws:** Article XIV of the Bylaws provides that the Constitution and bylaws may be amended at "any annual session." Therefore no amendments to the Constitution and Bylaws may be introduced at the Special Session.

**Privilege of the Floor:** At the discretion of the Speaker with the approval of the House, privilege of the floor may be granted to any member of the Society and Staff.

**RECOMMENDATIONS:**

1. That the agenda attached herewith be adopted as the official order of business for this current Special Session of the House of Delegates, that no new business may be introduced after the adoption of this agenda, and that the Speaker of the House be authorized to call for Committee reports at his discretion in order to expedite the business of the House.

2. That the Report of the Committee on Rules and Order be approved and that the report constitute the standing rules for the proper conduct of business at this Special Session of the House of Delegates.

DENNIS S. COOK, *Chairman*  
C. Z. CANDLER, JR.  
W. STEWART PEERY

**Action by House of Delegates:** Adopted, December 11, 1960.

**AGENDA**

**SPECIAL SESSION OF THE HOUSE OF DELEGATES  
NORTH CAROLINA DENTAL SOCIETY**

The Carolina, Pinehurst, North Carolina

December 11, 1960

9:30 a.m.

1. Meeting called to order by the Speaker of the House—Ralph D. Coffey.
2. Invocation
3. Roll Call
4. Report of Committee on Rules and Order—Dennis S. Cook
5. Reports by Committee Chairmen—
  - A. Executive Committee—Riley E. Spoon, Jr.
  - B. Dental Service Corporation Committee—Paul Fitzgerald, Jr.
  - C. Legislative Committee—H. Royster Chamblee
  - D. Committee on Dental Care of the Aged—Riley E. Spoon, Jr.
6. Announcements
7. Adjournment

**COMMITTEE ON DENTAL CARE OF THE AGED**

As chairman of the special committee appointed by your president, I have been asked to explain to you what the new health bill, Medical Assistance for the Aged, means to the dental profession of North Carolina.

Before discussing the details of the bill itself, it may be desirable to review very briefly the events leading up to its passage by the 86th Congress. The very beginning was the passage of the original Social Security Act in 1935. Since that date, the Social Security Act has been amended fourteen times.

During the 86th Congress, one hundred and three (103) bills were introduced designed to amend the Social Security Act. Thirty-three (33) of these dealt with the health care of the aged.

It is believed the passage of the new health legislation, about which we will talk, was triggered by the introduction of the Forand Bill in February 1959. The President signed the new bill in September 1960.

What does the new health bill provide? The 1960 amendments to the Social Security Act establish, in addition to the health bills already in effect, an entirely new program of Medical Assistance for the Aged.

Under this new program, the congressional intent is to help the States furnish medical assistance for aged individuals who are not recipients of Old Age Assistance. Further, Congress intends to aid those whose income and resources provide food, clothing, and shelter, but are not sufficient to meet the cost of necessary medical and dental services.

A state plan, in order to be approved by the Department of Health, Education, and Welfare, must include:

1. Some institutional and non-institutional care
2. Preclude any enrollment fee or premium as a condition of eligibility

3. Provide for furnishing assistance to individuals who are residents of the State but are absent therefrom
4. Provide that the information about the applicant be confidential
5. Include reasonable standards for determining eligibility for and the extent of assistance
6. Medical assistance available to any citizen of the state 65 years of age or older who qualifies under the eligibility requirements

A state plan may designate that any or all of the following services shall be included in the program for medical assistance for the aged:

1. Inpatient hospital services
2. Skilled nursing-home services
3. Physicians services
4. Hospital services — both outpatient and clinic
5. Private duty nursing services
6. Home health care services
7. Physical therapy
8. Dental services
9. Laboratory and X-ray services
10. Prescribed drugs, glasses, and prosthetic devices
11. Diagnostic, screening and preventive services
12. Other medical or remedial care recognized under state law

Since the services to be offered must be statewide, priority has been given to:

1. Institutional care
2. Non-institutional care
  - a. home visits
  - b. office visits
3. Dental care
4. Drugs

The state Department of Public Welfare has asked the state societies responsible for the above services to submit suggested plans to implement this new health program.

It is estimated that there are 300,000 people 65 years of age and older in North Carolina, and that 80 per cent of these people will qualify under the new health program.

This is the essence of the Medical Assistance for the Aged health bill.

May I take one moment to give you these thoughts: Today we are living in changing times. The platforms of both political parties indicate the change in attitude toward medical and dental care. Think how close we came to seeing compulsory health legislation this year and be assured that under the new administration we shall see repeated efforts. The ADA Newsletter, December 1, 1960, quoted President-Elect Kennedy as saying: "we must provide a more adequate program of medical care for the aged — a system which enables a man during his working days to set aside in a trust fund the cost of health insurance after retirement."

The Special Committee, in making recommendations to the Executive Committee, was confident that under the direction of an Advisory Board from the North Carolina Dental Society, the medical assistance for the aged program could:

1. Be used to help the self-supporting individual stay self-supporting, in protecting against becoming totally dependent as a result of catastrophic medical and dental costs
2. Afford help to those who need help
3. Assure that control of the program will remain at local levels
4. Assure professional supervision of the program
5. Insure that the method and amounts of payments to the providers of a service be equitable and be determined in conference between the public agency and the provider
6. Assure the patient the freedom of choice and the dentist the freedom to participate or not to participate in the program

The Committee also felt that the new health program is highly flexible, adjustable by the states to suit their own resources, their own living standards, and their own existing health program to help the elderly. Perhaps, for a first time, many counties of our state will include some

dental services. Others may improve their dental program for the needy.

On the consideration of these facts, the special committee recommended that the Executive Committee adopt a resolution urging that legislation be passed to implement the program in North Carolina.

The Executive Committee adopted the following resolution December 3, 1960.

"The Executive Committee of the North Carolina Dental Society on December 3, 1960, considered and studied the provisions of P.L. 86-778 (Social Security Amendments of 1960) passed by the 86th Congress of the United States which provides for furnishing medical and dental assistance to citizens 65 years of age and above, and recognized the responsibility of the dental profession in providing dental care for the aged under the provisions of this legislation.

"Therefore, we urge the State of North Carolina to enact such legislation as may be necessary to permit this state to participate in this program; and further, we empower and authorize the Committee on Dental Care of the Aged of the North Carolina Dental Society to offer its services to the State of North Carolina in the formation and implementation of plans and policies to utilize the benefits of this legislation."

#### RECOMMENDATION:

That the House of Delegates adopt the resolution on the implementation of the Medical Assistance for the Aged Program previously approved by the Executive Committee on December 3, 1960.

RILEY E. SPOON, JR., *Chairman*

E. A. PEARSON, JR.

JOHN C. BRAUER

**Action by the House of Delegates:** Adopted, December 11, 1960.

*NOTE: At the same time the House went on record as opposing socialized medicine and noted that P.L. 86-778 (Social Security Amendments of 1960) passed by the 86th Congress was a step in this direction. However, the House felt that the dental profession was almost forced to endorse the MAA program and noted that the medical profession had reached the same conclusion. It was generally agreed that the dental profession in this state was reluctant to participate in this type of program, but, if and when, the sovereign state sees fit to implement a plan for medical care for the aged, then the profession would co-operate to try to make it a success.*

#### DENTAL SERVICE CORPORATION COMMITTEE

**Instructions from 1960 House of Delegates:** The 1960 House of Delegates directed that the Dental Service Corporation Committee continue to study the advisability of forming a Dental Service Corporation in North Carolina and that enabling legislation be sought if necessary.

**Enabling Legislation Needed:** Legal counsel has advised that enabling legislation must be obtained if the Society desires to form such a corporation. We are of the opinion that North Carolina would do well to have this enabling legislation.

**A Serious Responsibility:** We think it would be wise to set up the corporation even if there is no contemplation of doing business. However, we want to make it clear that such legislation and corporation will impose on the Society serious responsibilities and obligations and the co-operation of the membership must be assured. It is probably the best solution to the demand of unions and governmental agencies for the group purchase of dental care yet propounded. In establishing a dental service corporation, dentistry is laying its integrity and prestige on the line. Once embarked upon, failure cannot be countenanced.

#### RECOMMENDATION:

That the Legislative Committee with the help of legal counsel be directed to prepare and cause to be submitted to the 1961 session of the North Carolina General Assembly enabling legislation to permit the establishment of a dental service corporation.

PAUL FITZGERALD, JR., *Chairman*  
J. HOMER GUION

C. B. JOHNSON (New Bern)  
A. T. LOCKWOOD  
J. R. WHELESS

**Action by the House of Delegates:** Adopted, December 11, 1960.

### EXECUTIVE COMMITTEE

*Instructions from 1960 House of Delegates:* The 1960 House of Delegates adopted the following resolution:

*"Whereas, the General Statutes of North Carolina (G.S. 90-22) impose upon this Society the duty and obligation to elect the members of the State Board of Dental Examiners who shall be members of the North Carolina Dental Society, and*

*"Whereas, it is the considered judgment of the Society that some change should be made in the statute imposing such duty; now therefore be it*

*"Resolved, that the executive committee of this Society and counsel for this Society are instructed to prepare and cause to be submitted to the next session of the General Assembly of North Carolina a proposed amendment eliminating from said statute the requirement that members of the State Board of Dental Examiners must be members of this Society, and be it further*

*"Resolved, that counsel and the executive committee of this Society are instructed to study, prepare and submit to this House of Delegates, at a meeting to be called by the President, recommendations as to legislation providing changes as to manner or method of selecting members of the North Carolina State Board of Dental Examiners, and be it further*

*"Resolved, that counsel and the executive committee of this Society, after the enactment of any legislation as contemplated hereinabove in this resolution, shall present to the House of Delegates proposed changes in Article V of the Constitution and any other provisions of the Constitution or Bylaws of this Society required by or consistent with such legislation."*

### RECOMMENDATION:

Pursuant to the above resolution and upon the advice of legal counsel, the Executive Committee has studied the matter and recommends that the Legislative Committee and legal counsel be directed to prepare and cause to be submitted to the next session of the General Assembly of North Carolina amendments to the General Statutes of North Carolina to provide for a system of election of members of the North Carolina State Board of Dental Examiners by all registered dentists in North Carolina, and the elimination from the General Statutes of the requirement that the members of the Board be members of the North Carolina Dental Society.

RILEY E. SPOON, JR., *Chairman*

Action by the House of Delegates: Adopted, December 11, 1960.

### LEGISLATIVE COMMITTEE

**Licensure Legislation Proposed:** The North Carolina Dental Laboratory Association has indicated that it intends to introduce legislation at the next session of the North Carolina General Assembly which would license dental laboratories of this state. This is contrary to the policy of the American Dental Association and would seriously disturb the adjunctive relationship of the laboratory craft and the dentist. Efforts by the Executive, Prosthetic Dental Service and Legislative Committees to negotiate this issue with the Laboratory Association have apparently failed to date.

The Legislative Committee has taken steps to secure the support of the District Societies in opposing this legislation. All five districts last fall passed resolutions in opposition to licensure legislation and petitions were signed by a goodly number of the members. Further, the members of both the Prosthetic Dental Service Committee and the Legislative Committee are attempting to contact all laboratories in this state asking them for their cooperation with the Society in opposing licensure. This program is bearing some fruit but not conclusively. It is the hope of the Legislative Committee to prevent the bill from ever reaching the Legislature.

**Liaison Dentists:** A list of liaison dentists who will contact both national and state legislators in behalf of bills affecting dentistry is



being prepared and should be completed within the next few weeks. The Committee feels that an adequate organization of this kind is imperative, particularly this year when it is anticipated many bills affecting the profession will be considered on state and national levels. These liaison dentists will serve to inform legislators on the problems of dentistry in its relation to the health and welfare of the people.

**Amendments to the Dental Practice Act:** The North Carolina State Board of Dental Examiners proposes to introduce in the next session of the North Carolina General Assembly certain amendments to the dental practice act which would in effect: (1) Correct one section already declared unconstitutional by a Superior Court Judge; (2) Make prescriptions mandatory; (3) Raise the fee for duplicating a license from \$2.00 to \$5.00; (4) Make it necessary for a reciprocal agreement to be enforced before the law would be applicable; (5) Eliminate the requirement of publishing notice of the annual meeting in at least three daily newspapers at least ten days prior to said meeting.

### RECOMMENDATIONS:

1. That the enactment of occupational licensure statutes for dental laboratory technicians and commercial dental laboratories in North Carolina be opposed on the basis that such legislation is not necessary to protect the health, safety and welfare of the public.

2. That the Legislative Committee be directed to extend every effort and means at its disposal to vigorously oppose any effort to enact occupational licensure statutes for dental laboratory technicians and commercial dental laboratories in the North Carolina General Assembly.

3. That the North Carolina Dental Society approve the amendments to the General Statutes of North Carolina proposed by the North Carolina State Board of Dental Examiners as outlined in this report.

4. That the Legislative Committee be directed to support such legislation when introduced in the North Carolina General Assembly.

H. ROYSTER CHAMBLEE, *Chairman*  
E. U. AUSTIN  
PAUL E. JONES  
W. T. MCFALL  
S. W. SHAFFER

**Action by the House of Delegates:** Adopted, December 11, 1960.

## ATTENDANCE RECORD

### SPEAKER OF THE HOUSE

RALPH D. COFFEY

**OFFICERS:** Luther H. Butler, Norman F. Ross, S. P. Gay, S. B. Towler.

**EXECUTIVE COMMITTEE:** Riley E. Spoon, Jr., S. H. Isenhower, Darden J. Eure, W. B. Sherrod.

**Ethics Committee:** G. L. Hooper, A. C. Current, Jr., Bernard N. Walker.

**State Board of Dental Examiners:** Horace K. Thompson, S. W. Shaffer.

**First District:** Dennis S. Cook, M. M. Forbes, John W. Girard, C. Z. Candler, Jr.

**Second District:** James A. Harrell, L. C. Holshouser, James E. Graham, Jr., W. Stewart Peery, Robert A. George.

**Third District:** W. P. Hinson, Jr., M. L. Cherry, C. W. Poindexter, J. T. Lasley, C. H. Teague.

**Fourth District:** T. G. Collins, C. P. Osborne, Jr., L. D. Herring, C. W. Sanders, Marcus R. Smith.

**Fifth District:** W. W. Umphlett, C. B. Johnson (New Bern), R. H. Gilbert, R. B. Barden (A), R. A. Daniel (A).

(A) indicates alternate delegate.



PRESIDENT LUTHER H. BUTLER (center) receives the president's emblem and certificate from Past President W. B. Sherrod (left) while Toastmaster R. Bruce Warlick looks on.

# TRANSACTIONS

105th Annual Session

North Carolina Dental Society



THE CAROLINA

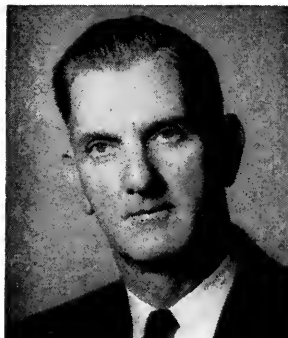
Pinehurst, North Carolina



May 14-17, 1961

# Report of the President

LUTHER H. BUTLER, D.D.S.  
Greensboro  
May 15, 1961



Dr. Gay, officers and members of the North Carolina Dental Society, distinguished guests and friends:

Let me welcome all of you to the 105th Annual Session of the North Carolina Dental Society. I sincerely hope that you will enjoy and profit from the experiences you will share here with your fellow practitioners for the next few days.

For the past five years it has been a real privilege to serve as Secretary-Treasurer, President-Elect and finally as President of this Society. I am grateful to all of you for the opportunity this has afforded me of enjoying close contact with members the length and breadth of this state. In every instance, where my presence was indicated and desired, I was there and I assure you I enjoyed every minute of it. I am grateful to each of the districts for the many courtesies and the warm hospitality extended me at their annual meetings. My associations with fellow dentists throughout the state during these past five years has strengthened my conviction that dentists are the finest people in the world. I am proud to be counted among you.

The time has come when I must present to you my stewardship report and thereby discharge my obligation as your President. This is a privilege which I have anticipated with mixed feelings for two years. It involves a tremendous responsibility. Time will not permit, nor could you be expected to endure, a detailed account of the many endeavors and accomplishments of this Society during the past year.

There has never been a time in the history of dentistry when there were so many things of such great importance to discuss as today. However, it is not my intention to dwell at any great length on the details of the many issues that have confronted us during the past twelve months. At the risk of overlooking some, I will confine my remarks to those issues which have been in the forefront during the past year.

By direction of the House of Delegates, a five-point legislative program in the 1961 General Assembly in North Carolina has been in progress. It included: (1) an amendment to the dental practice act which will permit all registered dentists residing in the state to vote for members of the North Carolina State Board of Dental Examiners; (2) changes in the general statutes requested by the Board of Dental Examiners which will provide a mandatory prescription law governing all work performed by dental laboratories for dentists, and increase the fees for renewal and duplication of licenses; (3) enabling legislation for the establishment of

a dental service corporation in this state; (4) enabling legislation to allow North Carolina to participate in a medical care for the aged program under the Kerr-Mills Bill; (5) opposition to and defeat of legislation proposed by the North Carolina Dental Laboratory Association to license dental laboratory technicians.

This has been a tremendous undertaking. We have had the advantage of expert legal counsel. I cannot tell you how much help this has been to us. I do not believe we can ever afford to be without legal counsel in the future. Colonel Joyner and Mr. Howison have worked closely with our Executive Committee and our Legislative Committee. With their competent help it is our sincere hope that every one of these legislative objectives will be accomplished before the General Assembly adjourns.

I wish I could report to you now that our program has been completed. In regard to the above five-point legislative program, No. 1, the amendment to the dental practice act which will permit all registered dentists residing in the state to vote for members of the North Carolina State Board of Dental Examiners, has become law; No. 2, the changes in the general statutes requested by the Board of Dental Examiners which will provide a mandatory prescription law governing all work performed by dental laboratories for dentists, and increase the fees for renewal and duplication of licenses, is in the legislative "hopper" and thus far has been reported favorably; No. 3, our legal counsel is now working with the enabling legislation for the establishment of a dental service corporation in this state; No. 4, enabling legislation to allow North Carolina to participate in a medical care for the aged program under the Kerr-Mills Bill; this has been approved by the Officers, Executive Committee, and House of Delegates. Although there is much to be desired in the Kerr-Mills Bill, it appears that it would be more acceptable to us than the proposed legislation which would be supported by the Social Security Act. Thus far No. 5 is inactive.

Every one of these legislative objectives has a direct bearing on the life and the future of organized dentistry in this state. And the outcome will affect you and me as individual dentists.

In March, 1960, a Negro dentist filed suit in the Western District Federal Court in Charlotte charging that he was being denied membership in the North Carolina Dental Society because of race, and his constitutional right to vote for members of the State Board of Dental Examiners. We went into this matter very thoroughly with legal counsel and were advised that unless we fought the case, we would seriously endanger our status as a professional voluntary organization with the right to select our own members.

The case is still pending in the court, although we are expecting it to come to trial momentarily. I would hesitate to predict what the outcome will be. However, I want to impress upon you that your officers, Executive Committee, and House of Delegates acted in what they considered your best interests. The case created considerable comment in the press. It was the first instance where a voluntary professional organization had been challenged in the courts.

The decision to act was a hard one to make. There were many considerations involved. We are hopeful that the matter will be brought to a successful conclusion before too long.

As members of the profession we should be seriously concerned over the need for more dental manpower in what the newswriters describe as an exploding population. The obvious answer is more classroom space in dental schools and even more dental schools. However, right here we have a problem. In the past year there were over 100 vacancies in the

47 dental schools in the country. A recruitment program to attract the best of our youth to dentistry as a career must be maintained and intensified. In North Carolina, we have one of the best dental schools in the country, of which we can be justly proud. It presents us an opportunity and a challenging responsibility to insure that our best young men and women choose dentistry for their life's work. Plans are now underway to increase the class size from 50 to 75.

One of the greatest needs in our state is a program to train qualified laboratory technicians. The present "on the job method" of training is not only obsolete but unfair to the trainee in having to spend so much time as an apprentice, as well as a hardship and a financial loss to the laboratory operator, if he spends any appreciable time teaching the student. During the past year North Carolina has made the headlines in the dental world in this area. In co-operation with the Durham City Schools, UNC School of Dentistry, the State Department of Education, a Special Committee and the Prosthetic Dental Service Committee, many meetings and countless hours have been spent in the planning of a two-year course for training dental laboratory technicians. This is to be set up in accordance with the standards of the American Dental Association and its Council on Dental Education, and the American Dental Laboratory Association, at the Durham Industrial Education Center. The proposed plan is for approximately 20 students of post-high school level.

It will be the first of its kind in the South and will go a long way in improving the standard of dentistry in this state. It is planned to open the school in the fall of 1961. It was not accomplished as easily as you might think from the simple explanation I have given you. There were many obstacles to overcome, together with some opposition.

On April 10, 1961, a great disappointment came when the Durham Board of Education voted unfavorably on this project, having in mind that too few of the graduates would be employed in the immediate area. However, the State Department of Education indicated that the Durham Center would offer the training of dental laboratory technicians, while other centers throughout the state would feature other technical fields. On May 8, 1961, the Durham Board of Education, at the request of your state officers and the Durham-Orange County Dental Society, reconsidered the question and approved the project.

Further, the ADA Council on Dental Education has recommended research studies in the training of dental assistants. Your Executive Committee has endorsed such a program at the UNC School of Dentistry.

These are evidences that North Carolina is looking to the future and is endeavoring to find the answer to the dental manpower shortage.

Next to our legislative program, perhaps no other issue has consumed more hours of deliberation and discussion on the part of this administration than the Kerr-Mills Bill, and its application in North Carolina. As you know, it was passed by Congress last fall and was the answer to the Forand type legislation. At the risk of oversimplifying, the Kerr-Mills Bill provides for medical care for the aged on a voluntary basis for those who need it. The Forand measure would tie in a program of medical care for the aged with the Social Security Program and OASI participants over 65 would receive the benefits regardless of need.

We are well aware that it tends toward socialized medicine. However, the health professions generally agreed that it was a more palatable substitute and might even help to defeat expansion of the Social Security type program in the future.

As Dr. Hillenbrand has pointed out, the dental profession can ill afford to brand every new health program proposed by the government as socialized medicine and then stick its head in the sand. Like a skilled

boxer, we have got to learn to roll with the punches if we are to maintain any vestige of private practice. To simply do nothing but proclaim it as socialism will be our downfall. We must use every means at our command to act positively. We must do something. We must offer definitive programs of our own or we will be swallowed up.

It was this philosophy that led this administration to support enabling legislation to permit North Carolina to participate in the matching Federal aid program for medical care for the aged. We felt that by more active participation we could at least control the situation. In cooperation with the medical, pharmaceutical and hospital associations in this state we are asking the General Assembly to pass this enabling legislation.

What I am about to say will not be popular. Any time you touch a man's pocketbook you are in dangerous territory. I want you as professional men to face the facts and face them squarely. These are my sincere convictions. They are on my heart, mind and conscience and I am compelled to share these thoughts with you. It is an opportunity I cannot allow to pass without comment.

We cannot continue to ignore the growing demand of the public for health care. There is a great tendency by many groups to seek more fringe benefits in the way of health care. It is a foregone conclusion that the average hospital and many physicians are so entwined in various types of insurance that at the present time it would be difficult, if at all possible, for them to operate on a private basis.

As an example of what is happening, Dr. Amos N. Johnson, President of the Medical Society of the State of North Carolina, said recently: "On any given day in North Carolina, from 20 to 25 per cent of the patients in hospitals don't need to be there." Some of these people are in the hospital at their own insistence; but many others are sent there needlessly by their doctors, Dr. Johnson pointed out.

Speaking about socialized medicine, Dr. Johnson continued: "In every instance, in every nation where socialized medicine has been tried, the quality of medical care dropped."

I think the above speaks for itself. The handwriting on the wall clearly indicates what the dental profession is in for, unless we are big enough and unless we are men enough to put service to the public above love of monetary gain. The continued growth of health programs on a mass basis will eventually destroy the doctor-patient relationship characteristic of private practice which we profess we want to maintain.

We should be more realistic and ask ourselves these questions. How are the masses of people to pay for health services? Is it true that a high percentage of the people of our state do not have the means to defray the expenses of a long period of illness? Should we now begin to think of some means whereby these people can receive the proper dental care? Certainly the whole question of health care on a mass basis is confusing, controversial and gives much cause for alarm. We should benefit from the experiences of the medical profession and what their group plans have brought about.

Truthfully, I do not know the answer. I wish I did. However, I am convinced that we must strive to take care of the dental needs of the people through private practice. We must approach dental health care programs on a mass basis with *caution*. Otherwise, we will kill the goose that laid the golden egg. If we continue in the present trend, we are asking for socialized dentistry. If we do not take care of the public in our private practice then somebody must and that somebody is the government.

The Kerr-Mills Bill is but one example of health care on a mass basis. It is one of many governmental health programs precipitated by

the health professions themselves. It was the answer of the government to the crying need of those who could not afford medical care.

Do not misunderstand what I am saying. I am not advocating cheap dentistry. I am not suggesting lower standards of dentistry. To put it bluntly, I am saying that excessive and unreasonably high charges for dental care will inevitably place dental care beyond the reach of a great mass of people. In our own state with a per capita income in 1958 of \$1,420.00 per year, the situation is critical. The responsibility is ours as individuals.

I wish it were possible for me to pay adequate tribute to the wonderful work performed by all committee chairmen and members in your behalf this year. I am proud of their accomplishments. If this administration has made any progress it has been due to their hard work and every one of us can be thankful for their arduous hours of service, not without sacrifice to their personal affairs and time away from their families.

Committees are the life line of a growing organization. They are an absolute necessity to any organization. However, I would make this suggestion to future administrations. You know, hindsight is far better than foresight. I have found that our committee system has become a bit unwieldy, especially in special committees. Our Constitution and Bylaws require seventeen standing committees. In addition there are 32 special committees. A total of almost 50.

I would suggest that within the framework of the 17 standing committees, the work of the Society can be adequately accomplished. A quick examination will reveal that the responsibilities of several of the special committees can be consolidated under one of the standing committees. By such a process, I believe special committees can be reduced considerably. Projects which are the responsibility of a standing committee can be delegated to a sub-committee if necessary.

The past two administrations have advocated an increase in state dues. They were convinced, as I am, that we must have more operating revenue if we are to meet our obligations as a professional organization. The present level of dues is modest. Twenty-five dollars annually for a professional man to promote better dental care in this state is a very modest figure in comparison with dues of comparable health professions. We can maintain the status quo on this present level but we cannot expand. We cannot afford programs which will benefit not only ourselves as dentists, but the public whom we serve.

Last year the First District adopted a resolution advocating a raise in state dues and requesting the President of the State Society to appoint a committee to investigate and study this need and report to the House of Delegates. I appointed such a committee and their report to the House of Delegates will give the whole picture so that your Delegates can vote intelligently on the matter. I suggest a \$10.00 increase in state dues.

At the invitation of the North Carolina Congress of Parents and Teachers Association, I met with its officials to discuss a proposed state-wide program of continuous health supervision for children of all school-age groups. I was impressed with the scope of the program and the ready-made opportunities it presented to dentistry for educating not only the children of our state, but their parents as well, on good dental care. By co-operating with the PTA in this we have an effective means of promoting the cause of good dentistry, and I am recommending that the North Carolina Dental Society offer strong support in implementing this program.

There are so many areas of dentistry which I have neglected to mention and by omitting them I do not mean to convey the impression they



are not important. You will see a complete report of these committees in the Blue Book.

Your April Journal reported there were 34 communities in North Carolina fluoridating their public water supplies as of March 1961. A total of over a million people in urban areas are now drinking fluoridated water in this state. We are making progress slowly but surely in this area. It is our responsibility as a profession to continue our efforts until all public drinking water in our state is fluoridated. We can do no less.

Recently the Society has taken an interest in the Science Fair movement as a means of encouraging the study of dentistry by young people. These Science Fairs are attracting attention throughout the state and some of our high school students have come up with some remarkable scientific exhibits on dentistry. I am hopeful that the Society will continue to cooperate with the high schools in this movement. It presents a wonderful opportunity to promote good will and good dentistry and to attract the best of our youth to our profession. We appropriated a modest sum this year for this activity. What is more important, individual dentists offered their counsel and advice to these young people in the preparation of exhibits.

These young people have gained a new respect for dentistry and for those dentists who took time from a busy schedule to work with them. To the individual dentist this can be a rewarding experience and the profession will benefit in the long run.

I am gratified by the renewed interest in study clubs throughout the state. This is the best means I know of fulfilling our obligation as dentists to continue our education in order to better serve our patients. This is the "do it yourself" program of dentistry and from my own personal experience I can commend it to you.

The laboratory craft is an important adjunct to dentistry. The proper relationship between the dentist and the dental laboratory must be maintained, not only in the interest of the profession but for the protection of the public. Recently, the gap between the profession and the laboratories in this state has widened. Conflicting and controversial issues have arisen and relations have become strained. I hasten to add that there are many laboratories in this state who have loyally supported the profession in this crisis. We are grateful for them. Unfortunately, they are in the minority.

Your officers have made a serious effort to close this gap and strengthen our relationship with the laboratories so that we can work in harmony with the laboratories as a group for the betterment of dentistry. To date the response has been disappointing. Through the efforts of the Executive Committee and the Prosthetic Dental Service Committee and with the co-operation of the University of North Carolina School of Dentistry, advanced training courses for laboratory technicians will be made available at Chapel Hill in the near future. We believe this is a good starting point.

The local and district societies are urged to include laboratory men in plans for their meetings and invite them to programs which will be of benefit to them. We believe that better relations between the laboratories and the profession can best be achieved on the local level. Laboratories are a part of the family of dentistry. The more contacts we have with them the closer they will feel toward us and the more they will appreciate good dentistry and their responsibility as technicians. Better communication and closer co-operation between the laboratories and the profession will mean a better understanding and appreciation of each other's problems.

As the hour approaches when I shall pass the gavel to Dr. Norman

Ross, our incoming President, I would like to express my thanks and deep appreciation to all who have contributed so much of their energy and time this year. In particular I shall always remember the strong support of our Executive Secretary, Mr. A. M. Cunningham, and his assistant, Miss Mira Riddle. They bridged the gap during the time we were "helping make history."

As we face the future and constantly changing situation, may I suggest this thought to you.

"Be not the first by whom the new is tried, nor yet the last to lay the old aside."

In closing may I again thank each of you for the wonderful cooperation given me, and for the privilege of serving as your President. It has truly been a wonderful experience.

May all the wonderful joys and blessings be yours—always!

### **RECOMMENDATIONS:**

Your President recommends:

1. A raise in the dues of the North Carolina Dental Society commensurate with present and future needs.
2. Approval of the pilot research study on training of dental assistants at the UNC School of Dentistry.
3. Support of the continuous health supervision program sponsored by the North Carolina Congress of Parents and Teachers.

# Report of the Secretary- Treasurer

S BYRON TOWLER, D.D.S.  
Raleigh



## NORTH CAROLINA DENTAL SOCIETY REPORT OF AUDIT, FISCAL YEAR ENDED MAY 31, 1961

Greensboro, North Carolina  
June 15, 1961

The Officers and Directors  
North Carolina Dental Society  
Raleigh, North Carolina

Gentlemen:

I have examined the books and records of the North Carolina Dental Society for the fiscal year ended May 31, 1961. My report, consisting of balance sheets and statements of receipts and disbursements for the General Fund, The Relief Fund, and the Development Fund, together with supporting schedules, is submitted herewith.

Cash in banks and savings accounts in savings and loan association have been confirmed by the depository institutions. U. S. Treasury Bonds in a safe deposit box in the First-Citizens Bank and Trust Company, Raleigh, North Carolina, have been certified to me by joint letter of your Treasurer and Executive Secretary. Recorded receipts have been traced into the bank. Cancelled checks and paid invoices have been examined and found in order and reasonably classified.

Inasmuch as the records are maintained on the cash basis, members' arrears and liabilities, if any, are not reflected in the balance sheet.

Respectfully submitted,

LOUIS N. HAND, JR.  
Certified Public Accountant

Exhibit A

**Balance Sheet—General Fund**  
**May 31, 1961**

**ASSETS**

Cash in Bank—Exhibit B.....	\$ 8,059.40
Savings Account—First Federal Savings and Loan Association, Durham, N. C.....	4,314.90
Savings Account—Raleigh Savings and Loan Assn.....	6,263.20
U. S. Treasury Bonds (Maturity Value \$2,300.00) —At Cost—Schedule 1.....	1,662.00
	<u>\$20,299.50</u>

**SURPLUS**

*Surplus:*

*Appropriated Surplus*

Reserve for Library and History Committee.....	\$ 1,600.00
<i>Surplus Available for Appropriation</i>	
Balance, May 31, 1960.....	\$22,152.61

*DEDUCT:*

Disbursement over Receipts—Exhibit A-1.....	3,453.11
Balance, May 31, 1961.....	18,699.50
	<u>\$20,299.50</u>

Exhibit A-1

**Analysis of Change in Surplus**  
**For the Fiscal Year Ended May 31, 1961**

<i>Revenue Receipts</i> for 1960-61.....	\$71,611.38
<i>Expenditure Disbursements:</i>	
Total Disbursements.....	\$75,526.03
<b>LESS: Non-Expense Payments</b>	
Transfer of Funds.....	\$ 410.76
Income Tax Deducted in 1959-60.....	50.78
	<u>461.54</u>
Net Expenditures.....	75,064 49
Expenditures Over Receipts (Exhibit A)	
Net Reduction in Surplus.....	<u>\$ 3,453.11</u>

Exhibit B

**Statement of Receipts and Disbursements—General Fund**  
**For the Year Ended May 31, 1961**

<i>Bank Balance</i> , June 1, 1960.....	\$11,974.05
<b>RECEIPTS:</b>	
Dues .....	\$61,274.50
Annual Session.....	6,386.25
Journal .....	3,399.75
Expense Reimbursements.....	62.30
Savings and Loan Dividend.....	410.76
Sales—Dental Formulary.....	75.00
Insurance Dividend.....	2.82
	<u>71,611.38</u>
Total Available Funds.....	<u>\$83,585.43</u>

## DISBURSEMENTS:

## Dues Remitted:

American Dental Association.....	\$30,542.50	
A.D.A. Relief Fund.....	1,166.00	
First District .....	1,253.00	
Second District .....	1,245.00	
Third District .....	1,205.00	
Fourth District .....	775.00	
Fifth District .....	548.00	
Refunds .....	1.00	
Total Dues Remitted.....		\$36,735.50

## Administrative Expenses:

Salary—Executive Secretary .....	\$ 8,000.00	
Assistant .....	3,600.00	
Other .....	660.75	
Social Security .....	276.17	
Office Rent .....	1,200.00	
Utilities .....	422.80	
Office Supplies .....	862.33	
Travel—Executive Secretary .....	954.31	
Telephone .....	621.72	
Postage .....	631.07	
Insurance .....	194.50	
Clipping Service .....	120.00	
Repairs and Maintenance.....	243.32	
Miscellaneous .....	15.50	
Withheld Taxes of Prior Year.....	50.78	17,853.25

## Publications:

Journal .....	\$ 4,048.91	
Proceedings .....	1,445.04	
Newsletter .....	230.30	5,724.25

## Committees:

Science Fair.....	100.00	
Annual Session (Schedule 2).....	6,649.54	

## Other:

Dental Foundation.....	\$ 120.00	
Bank Charges.....	7.65	
Audit .....	150.00	
District Officers Conference.....	48.66	
Memberships .....	23.00	
Re-invested Dividend.....	410.76	
Legal Counsel.....	6,759.27	
City and County Taxes.....	368.96	
Prior Year's Bill Paid.....	8.04	
Miscellaneous .....	83.36	
Office Furniture and Equipment.....	483.79	8,463.49

Total Disbursements .....\$75,526.03

Bank Balance, May 31, 1961 (To Exhibit A).....\$ 8,059.40

**U. S. Treasury Bonds—General Fund**  
May 31, 1961

Schedule 1

SERIAL NUMBER	DATE ACQUIRED	COST	MATURITY VALUE	MATURITY DATE
C40545J	Jan. 54	\$ 74.00	\$ 100.00	Jan. 66
C40546J	Jan. 54	74.00	100.00	Jan. 66
C40547J	Jan. 54	74.00	100.00	Jan. 66
Q22367J	Jan. 56	18.00	25.00	Jan. 68
C168915J	Jan. 56	72.00	100.00	Jan. 68
C168916J	Jan. 56	72.00	100.00	Jan. 68
C168917J	Jan. 56	72.00	100.00	Jan. 68
Q60612J	Nov. 56	18.00	25.00	Nov. 68
Q60613J	Nov. 56	18.00	25.00	Nov. 68
Q60614J	Nov. 56	18.00	25.00	Nov. 68
C169985J	Nov. 56	72.00	100.00	Nov. 68
D22068J	Nov. 56	360.00	500.00	Nov. 68
M178508J	Nov. 56	720.00	1,000.00	Nov. 68
		<u>\$ 1,662.00</u>	<u>\$ 2,300.00</u>	
		(Exhibit A)		

**1961 Annual Session Expenses**

Schedule 2

*Convention Committee:*

Stenotypist .....	\$ 590.71	
January Meeting .....	66.19	
Gratuities and Meals.....	141.80	
Registration (Registrars, badges, ribbons).....	245.37	
Mimeograph Supplies.....	95.24	
Transportation—tips, meals, insurance.....	42.56	
Presentations .....	9.24	
Staff—Hotel Expense.....	403.31	\$ 1,594.42

*Exhibits Committee:*

Refunds .....	\$ 156.25	
Prizes .....	306.52	
Exhibitors' Social Hour.....	79.79	
Exhibit Space and Decorating.....	1,116.00	1,658.56

*Entertainment Committee:*

Banquet .....	\$ 7.48	
Dance .....	350.00	
Reception .....	116.17	
Entertainment .....	75.00	
Flowers .....	66.95	615.60

<i>Housing Committee</i> .....	55.00
<i>Necrology Committee</i> .....	33.00

*Program Committee:*

Clinicians—Honorarium & Travel.....	\$ 1,527.42	
Visual Education and Scientific Exhibits.....	77.46	
Sound System and Projection Service.....	202.51	
Printing .....	226.60	2,033.99

<i>Hospitality Committee</i> .....	147.43
<i>Publicity Committee</i> .....	244.54
<i>Superintendent of Clinics</i> .....	28.09
<i>Skeet Shoot</i> .....	25.00
<i>Golf Committee</i> .....	1.25
<i>House of Delegates: (Includes special session in Dec.)</i> .....	212.56

Total Annual Session Expenses (To Exhibit B).....\$ 6,649.54

Exhibit C

**Balance Sheet—Relief Fund**  
**May 31, 1961**

**ASSETS**

Cash in Bank—(Exhibit D).....	\$ 3,387.97
Investment—First Federal Savings and Loan Association Durham, North Carolina.....	5,237 67
U. S. Treasury Bonds—Series F—Maturity Value \$12,825.00 —at cost—(Schedule 3).....	9,405.00
	<u>\$18,030.64</u>

**LIABILITIES**

Fund Balance:	
June 1, 1960 Balance.....	\$16,596.00
ADD: Receipts in Excess of Expense Disbursements (Exhibit D) .....	1,434.64
May 31, 1961 Balance.....	<u>\$18,030.64</u>

Exhibit D

**Relief Fund**

**Statement of Receipts and Disbursements**  
**For the Fiscal Year Ended May 31, 1961**

June 1, 1960—Balance—North Carolina National Bank.....\$ 3,598.47

*Receipts:*

Scrap Amalgam.....	\$ 1,727.50
A.D.A. Share Christmas Seal Receipts.....	968.00
A.D.A. Bonus.....	484.00
Savings and Loan Dividends.....	145.14
Total Receipts.....	<u>\$ 3,324.64</u>

*Disbursements:*

A.D.A. Special Relief Fund.....	\$ 1,890.00
Receipts in Excess of Expense Disbursements.....	1,434.64
(Exhibit C)	<u>\$5,033 11</u>

*Funds Transferred to First Federal Savings and  
Loan Association Account.....*

1,645.14

May 31, 1961—Balance—North Carolina National Bank.....\$ 3,387 97  
(Exhibit C)

Schedule 3

**U. S. Treasury Bonds—Relief Fund**  
**May 31, 1961**

SERIAL NUMBER	DATE ACQUIRED	COST	MATURITY VALUE	MATURITY DATE
M1686901F	Aug. 50	\$ 740.00	\$ 1,000.00	Aug. 62
M1686902F	Aug. 50	740.00	1,000.00	Aug. 62
M1686903F	Aug. 50	740.00	1,000.00	Aug. 62
V11338J	Jan. 54	3,700.00	5,000.00	Jan. 66
D18386J	Jan. 54	370.00	500.00	Jan. 66
Q17164J	Jan. 54	18.50	25.00	Jan. 66
Q17165J	Jan. 54	18.50	25.00	Jan. 66
M173548J	May 55	720.00	1,000.00	May 67
C153116J	May 55	72.00	100.00	May 67
C153117J	May 55	72.00	100.00	May 67
C153118J	May 55	72.00	100.00	May 67
C153119J	May 55	72.00	100.00	May 67
M198562J	Dec. 55	720.00	1,000.00	Dec. 67
C206330J	Dec. 55	72.00	100.00	Dec. 67
C206331J	Dec. 55	72.00	100.00	Dec. 67
C206332J	Dec. 55	72.00	100.00	Dec. 67
Q73231J	Dec. 55	18.00	25.00	Dec. 67
Q73232J	Dec. 55	18.00	25.00	Dec. 67
Q73233J	Dec. 55	18.00	25.00	Dec. 67
D22067J	Nov. 56	360.00	500.00	Nov. 68
M178507J	Nov. 56	720.00	1,000.00	Nov. 68
		<u>\$ 9,405.00</u>	<u>\$12,825.00</u>	
		(Exhibit C)		

Exhibit E

**Balance Sheet—Development Fund**  
**May 31, 1961**

**ASSETS**

Savings Account—First Federal Savings and Loan Association.....\$3,686.15

**LIABILITIES**

*Fund Balance—For Permanent Improvements:*

June 1, 1960 Balance.....\$ 3,543.01

ADD: Receipts over Disbursements for the year..... 143.14

May 31, 1961 Balance.....\$ 3,686.15

Exhibit F

**Receipts and Disbursements—Development Fund**  
**For the Year Ended May 31, 1961**

June 1, 1960—Balance, First Federal Savings and Loan Association, Durham, N. C.....\$ 3,543.01

*Receipts:*

Dividend Received—Savings and Loan Account..... 143.14

\$ 3,686.15

*Disbursements* ..... None

May 31, 1961—Balance—First Federal Savings and Loan Association, Durham, N. C.....\$ 3,686.15



Exhibit G

## Capital Fund

## BALANCE SHEET

May 31, 1961

## ASSETS

Furniture and Equipment—at cost.....	\$ 7,428.53
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## SURPLUS

*Surplus Not Available—Invested in Fixed Assets*

Balance—May 31, 1960.....	\$ 7,143.74
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ADD: Purchases in 1960-61 by General Fund:

Heyer Folding Machine, E-11415.....	\$ 295.68
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Flexo Desk Lamp.....	29.82
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Gray Lamp No. 4315.....	32.91
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Filing Cabinet.....	68.73
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Cole Shelf Unit (2).....	56.65
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Total Additions.....	\$ 483.79
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LESS: Pitney-Bowes Folder Traded.....	199.00	284.79
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Balance—May 31, 1961.....	\$ 7,428.53
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# Report of the Editor- Publisher

C. C. DIERCKS, D.D.S.  
Morganton



Once again I wish to thank the North Carolina Dental Society for the privilege of serving as Editor. If the membership benefited in the least, all efforts expended by those who contributed to the JOURNAL, and we who put it together, will not consider our efforts in vain.

The future of our JOURNAL is bright; but to keep it bright, progressive changes must be kept in mind. Following are some changes that could be made to better the JOURNAL:

1. Our Executive Secretary is not able to devote as much time to our society affairs as he should due to the fact that he must spend so much time as business manager. When additional central office help is acquired, a graduate with a journalism degree might be considered to take over the business management of the JOURNAL.

2. It is well to stimulate practicing dentists in our state to write for the JOURNAL. An associate editor would help considerably in helping to gather material to publish. I have mentioned this to the Executive Committee, and have mentioned several individuals who might be an asset to the society as an editor. I am certain that whatever decision the Executive Committee makes will be the right one.

3. After additional journalistic help and an associate editor are acquired, the JOURNAL should expand to four issues a year, plus the transactions issue. When this is accomplished, the next step should be a JOURNAL every other month. Our society is such that it deserves this type of journalistic coverage. I also feel, as many other dental societies feel, that we must not depend to such a degree upon advertisers to finance our JOURNAL. We must not publish a JOURNAL of advertising to defray the rising cost of publishing.

Once again I wish to thank all those who contributed to the JOURNAL, the central office staff, the wonderful officers of our Society, the Executive Committee, and all members of our Society for the privilege of serving as Editor.

# Report of the Executive Secretary

ANDREW M. CUNNINGHAM  
Raleigh



This past year represents not only my sixth year as your Executive Secretary, but perhaps the most challenging year since I assumed this office September 1, 1955, and opened the Central Office in Raleigh one month later.

During the past eleven months official business of the Society has required my presence at 54 formal meetings and conferences of one kind or another. This includes seven meetings of the Executive Committee, five District Meetings, the District Officers' Conference, the ADA meeting in Los Angeles and the Secretaries' Management Conference in Chicago. In terms of mileage, I find I have traveled over 3,500 miles within North Carolina and some 8,000 miles outside the state on Society business.

I have endeavored to fulfill my responsibilities as your Executive Secretary as outlined in the Constitution and Bylaws.

With an ever-increasing work-load your Central Office has been operated as efficiently and economically as possible. It is apparent that increased demands for services are taxing the facilities, personnel and space available to the fullest extent.

As an example, for the past eleven months the Central Office has received over 4,000 communications and dispatched nearly 23,000 individual pieces of mail. This is an average per month of 345 pieces of incoming mail and 2,074 pieces of outgoing mail. Included in these figures were four issues of the Journal (5,592) and seven issues of the Newsletter (8,468). The volume of correspondence is steadily mounting and the handling of it represents an enormous task for a staff of two. All details of bulk mailing in connection with the JOURNAL and the Newsletter are entirely accomplished by the Central Office staff and this takes a considerable amount of time. Good economy would dictate that in the future some consideration will have to be given to farming out such chores to relieve the staff for more important tasks.

All office equipment has been maintained in good working order through service contracts. This is good economy and an absolute necessity to keep our work moving along without interruption.

The standing and special committees have been exceedingly active this year and I have worked as closely as possible with all committees requiring my assistance in the accomplishment of their mission and objectives.

With the General Assembly in session my responsibilities have, of course, increased. I have co-operated in every way possible with the Legislative Committee and legal counsel in the promotion of an ambitious legislative program. I have attended innumerable committee hearings in behalf of legislation the Society either proposed or endorsed.

It is my observation that we need better communication with all members of the Society in order to keep them alert to the changing scene on local, state and national levels and its direct and indirect affect on dentistry. The lay public must certainly be constantly reminded of the necessity for good dental care and the importance of the role of dentistry in the health and welfare of our people. But the dentist cannot expect to educate the public properly unless he himself knows what is going on. A better informed membership is a requisite to a better informed public. To try to educate the public without first educating the dentist himself is like putting the cart before the horse.

This is a real problem and it is becoming increasingly acute. We need to increase the amount of information made available to the membership through publications but your Central Office is handicapped by limited staff. Further, your Executive Secretary would be of great value in this area, if he were given the opportunity to get about the state more and attend local society meetings to bring the information to the members on the local level. This personal contact would be an effective means of informing the membership. As the work load now stands, he is confined more and more to the Central Office.

It has been a gratifying experience to work with the officers and committees not only of the State Society but of the component societies as well. I deeply appreciate the understanding, consideration and co-operation extended me in the fulfillment of my duties.

I am particularly grateful to Miss Riddle for her capable assistance in the Central Office and the fine service she continues to render as my secretary.

ANDREW M. CUNNINGHAM  
*Executive Secretary*

May 3, 1961

**Action by House of Delegates:** Received for information, May 14, 1961.

# Minutes of Executive Committee

RILEY E. SPOON, JR., D.D.S.  
Chairman  
Winston-Salem



May 4, 1960  
September 18, 1960  
December 3, 1960  
January 7, 1961

January 8, 1961  
January 28, 1961  
March 16, 1961  
May 13, 1961

## THE CAROLINA, PINEHURST, NORTH CAROLINA May 4, 1960

**Call to order:** The Executive Committee convened at The Carolina, Pinehurst, North Carolina, Wednesday, May 4, 1960. Dr. Riley E. Spoon, Jr., Chairman, called the meeting to order at 12:30 p.m. and Mr. A. M. Cunningham led in prayer.

**Roll Call:** Members of the Executive Committee present were: Riley E. Spoon, Jr., Chairman; Luther H. Butler, President; Norman F. Ross, President-Elect; S. P. Gay, Vice President; S. B. Towler, Secretary-Treasurer; S. H. Isenhower, Member; W. B. Sherrod, immediate Past President.

Others present were: Dr. C. C. Diercks, Editor-Publisher; Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Assistant to the Executive Secretary.

**Welcome of New Members:** President Butler announced the following appointments to the Executive Committee: Dr. Spoon, Chairman; Dr. Darden J. Eure, a member for a period of three years to replace Dr. Truluck; and Dr. Isenhower, a member for a period of one year to fill the unexpired term of Dr. Ross, who had been elected President-Elect.

Dr. Butler noted that by virtue of an amendment to the Constitution and Bylaws approved by the 1960 House of Delegates, Dr. W. B. Sherrod, immediate Past President, is to serve as a member for a period of one year.

Dr. Butler welcomed the above new members and Dr. S. P. Gay, newly-elected Vice President.

**Appointment of Executive Secretary and Editor-Publisher:** In executive session the following appointments were made:

On motion by Dr. Ross, seconded by Dr. Gay, Mr. Andrew M. Cunningham was reappointed as Executive Secretary and Miss Mira Riddle was re-appointed as Assistant to the Executive Secretary for the year 1960-61. Motion carried.

On motion by Dr. Towler, seconded by Dr. Butler the salary of the Executive Secretary was set at \$8,000.00 (an increase of \$300.00) and the salary of the Assistant to the Executive Secretary was set at \$3,600.00 (an increase of \$110.00) for the fiscal year 1960-61. Motion carried.

On motion by Dr. Ross, seconded by Dr. Isenhower, Dr. C. C. Diercks was re-appointed Editor-Publisher for the year 1960-61. Motion carried.

On motion by Dr. Butler, seconded by Dr. Towler, expenses of the Editor-Publisher in the execution of his office are to be submitted by him annually for approval by the Executive Committee. Motion carried.

The members of the Executive Committee expressed their appreciation to Mr. Cunningham, Mrs. Cunningham, Miss Riddle, and Dr. Diercks for their interest and services rendered during the past year.

**Use of Surplus Funds:** On motion by Dr. Ross, seconded by Dr. Butler, the action of the Executive Committee of October 11, 1959, providing that excess of income over disbursements for the fiscal year 1959-60 be transferred to the Development Fund was rescinded. Any surplus at the end of the current fiscal year is to remain in the General Fund. Motion carried.

**Appointment of Budget Committee:** President Butler announced the appointment of the following to the Budget Committee: Dr. Sherrod, Chairman; Dr. Ross and Dr. Towler.

**Adjournment:** On motion by Dr. Towler, seconded by Dr. Sherrod, the meeting was adjourned at 1:25 p.m.

S. B. TOWLER, D.D.S.  
Secretary - Treasurer

*Read and approved September 18, 1960*

## SEDFIELD INN, GREENSBORO, NORTH CAROLINA

September 18, 1960

**Call to Order:** The Executive Committee convened at Sedgfield Inn, Greensboro, North Carolina, Sunday, September 18, 1960. Dr. Riley E. Spoon, Jr., called the meeting to order at 3:20 p.m. Mr. A. M. Cunningham led in prayer.

**Roll Call:** Members of the Executive Committee present were: Drs. Riley E. Spoon, Jr., Darden J. Eure, Samuel H. Isenhower, Luther H. Butler, Norman F. Ross, S. P. Gay, S. Byron Towler and W. B. Sherrod.

Others present were: Dr. C. C. Diercks, Editor-Publisher; Dr. Charles H. Teague, Chairman, Program Committee; and Mr. Andrew M. Cunningham, Executive Secretary.

**Approval of Minutes:** Dr. Butler moved and Dr. Isenhower seconded, that the minutes of April 30, 1961, and May 4, 1960, as previously circulated to the Committee members in mimeographed form be approved. The motion was carried.

**Financial Reports:** The report of the Secretary-Treasurer of August 31, 1960, was received for information. It was noted a total of \$1,452.00 had been received by the Relief Fund from the American Dental Association which represented one-half the amount contributed by the members of the North Carolina Dental Society to the 1959-60 annual Relief Fund Seal Campaign, plus a bonus of a quarter of the total contributions by North Carolina dentists. The bonus was awarded because the Society attained its annual quota in the campaign and also paid out in grants

the previous year a sum greater than was received as a regular refund from the ADA Relief Fund.

The Auditor's Report of the Secretary-Treasurer's accounts for the fiscal year 1959-60 was approved on a motion by Dr. Ross, seconded by Dr. Butler, and duly carried.

**Budget for 1960-61 Approved:** Dr. W. B. Sherrod, Chairman of the Budget Committee, presented a proposed budget for 1960-61. On motion by Dr. Eure, seconded by Dr. Gay and duly carried, the budget was approved. A copy is attached to these minutes.

**Program Committee Report:** Dr. C. H. Teague, Chairman of the Program Committee, reported that three clinicians had been secured for the 105th Annual Session. They are: Dr. Miles R. Markely, Denver, Colorado; Dr. Walter T. Colquitt, Shreveport, Louisiana; and Mr. Ralph W. Phillips of the University of Indiana School of Dentistry.

In addition Dr. Teague stated that the Southern Endodontic Society had offered to provide a panel of three outstanding authorities on endodontics at no expense to the Society except one day's hotel expenses for each of the three panelists. He explained that the Program Committee had agreed to accept the offer and that the panel would be scheduled at 4:00 p.m. on Tuesday. Unfortunately, this is the same time at which the Fraternity Hours are customarily scheduled, but no other time was available or suitable. He expressed the regret of his committee that both these events would have to be programmed concurrently.

Dr. Teague requested that an appropriation of \$2,000.00 be made to the Program Committee.

On motion by Dr. Isenhower, seconded by Dr. Sherrod and duly carried, an appropriation of \$2,000.00 to the Program Committee was approved. The Executive Committee agreed that it was unfortunate that both the Endodontics Panel and the Fraternity Hours would have to be scheduled concurrently. However, it was felt that the offer of the panel by the Southern Endodontic Society should be accepted and that the panel would greatly enhance the scientific program.

**Report of the Prosthetic Dental Service Committee:** A letter from Dr. C. P. Osborne, Jr., Chairman of the Prosthetic Dental Service Committee, reported that a statement on the establishment of the Training Program for Dental Laboratory Technicians had been prepared by the Committee, and that copies would be presented to all the members attending the District Meetings this fall to better inform them and to alert them to the opposition of the North Carolina Dental Laboratory Association to the program.

The report was received for information.

**Report of the Legislative Committee:** A report from the Legislative Committee dated September 15, 1960, was submitted. It stated that the following resolution opposing licensure legislation in this state had been sent to all districts with the request that it be approved at their meetings this fall. The resolution read as follows:

*"Resolved, that the enactment of occupational licensure for dental laboratory technicians and commercial dental laboratories in North Carolina be opposed on the basis that such legislation is not necessary to protect the health, safety and welfare of the public."*

Further, the report stated that a petition opposing licensure legislation would be distributed among the districts with the request that it be signed by all members of the districts.

On motion by Dr. Gay, seconded by Dr. Towler and duly carried, the report of the Legislative Committee was approved.

**Letter to North Carolina Dental Laboratory Association:** On motion by Dr. Isenhower, seconded by Dr. Towler, the Chairman of the Executive Committee was directed to forward a letter to the North Carolina Dental Laboratory Association stating that the Society was unalterably opposed

to licensure legislation in this state and was in favor of the establishment of the training program for laboratory technicians at the Industrial Education Center at Durham. Further, the letter was to request that the responsible officers of the North Carolina Dental Laboratory Association meet with representatives of the North Carolina Dental Society to discuss these matters about which both organizations were in disagreement.

**Unpaid Bill for 1959-60:** It was noted that a statement of the expenses for the Necrology Committee for the 104th Annual Session had been received too late for payment during the fiscal year 1959-60. The Executive Committee authorized the Secretary-Treasurer to pay this bill.

**Out-of-State Trips Authorized for the Executive Secretary:** On motion by Dr. Butler, seconded by Dr. Gay, the Executive Secretary was authorized to attend the ADA meeting in Los Angeles October 17-20, 1960, and the Secretaries' Management Conference in Chicago November 17-20, at the expense of the Society. The motion was carried.

**Special Session of the House of Delegates:** On motion by Dr. Towler, seconded by Dr. Ross, and duly carried, the Executive Secretary was directed to consult with the Society's attorneys to determine an appropriate weekend date for the Special Session of the House of Delegates for the purpose of considering changes in the Dental Practice Act. Further, he was directed to investigate the possibility of scheduling the District Officers' Conference and the joint meeting of the Executive Committee and the Convention Committee on the same weekend set for the Special Session of the House of Delegates.

It was pointed out that a good many of the same people would be involved in all three meetings and such an arrangement would save considerable time and travel expense.

**Dates for 106th Annual Session:** A letter dated May 20, 1960, from The Carolina, advised that the dates of May 6-9, 1962, were being reserved for the 106th Annual Session of the North Carolina Dental Society.

**Adjournment:** There being no further business the meeting was adjourned at 5:40 p.m. on motion by Dr. Isenhower, seconded by Dr. Towler.

S. BYRON TOWLER, D.D.S.  
Secretary-Treasurer

*Read and approved December 3, 1960*

### CENTRAL OFFICE, RALEIGH, NORTH CAROLINA December 3, 1960

**Call to Order:** The Executive Committee convened at the Central Office, Raleigh, North Carolina, Saturday, December 3, 1960. Dr. Riley E. Spoon, Jr., called the meeting to order at 7:45 p.m. A. M. Cunningham led in prayer.

**Roll Call:** Members of the Executive Committee present were: Doctors Riley E. Spoon, Jr., Darden J. Eure, Samuel H. Isenhower, Luther H. Butler, Norman F. Ross, S. P. Gay, S. Byron Towler and W. B. Sherrod.

Others present were: Dr. H. Royster Chamblee, Chairman of the Legislative Committee; Col. W. T. Joyner and Mr. R. C. Howison, Jr., legal counsel; Dr. E. A. Pearson, Jr., Director, Division of Oral Hygiene; A. M. Cunningham, Executive Secretary, and Miss Mira Riddle, Assistant to the Executive Secretary.

**Approval of Minutes:** On motion by Dr. Ross, seconded by Dr. Towler and duly carried, the minutes of September 18, 1960, as previously distributed to the Committee in mimeographed form, were approved.

**Financial Report:** The report of the Secretary-Treasurer of November 30, 1960, was received for information.



**Report on Law Suit:** Col. W. T. Joyner reported that a hearing on the Society's motion to dismiss the law suit of Dr. Hawkins was held before Judge Warlick October 24 and that the latter had requested briefs to be filed by both litigants by December 1. Col. Joyner said that the brief in behalf of the Society had been filed by the deadline date. He estimated that the Judge would rule on the motion to dismiss sometime in December and if the motion were denied, the case would probably be tried sometime in the Spring of 1961.

**Amendment to Dental Practice Act Approved:** Col. Joyner and Mr. Howison, legal counsel for the Society, outlined four possible ways of amending the General Statutes of North Carolina relative to the election of members of the North Carolina State Board of Dental Examiners. They emphasized that irrespective of the law suit now in litigation, this portion of the General Statutes which limits membership of the Board of Dental Examiners to members of the North Carolina Dental Society, should be changed.

On motion by Dr. Ross, seconded by Dr. Butler and duly carried, it was voted to recommend to the House of Delegates in Special Session December 11, 1960, that the General Statutes of North Carolina pertaining to the election of members of the North Carolina Board of Dental Examiners be changed to provide for a system of election of members of the Board by all registered dentists in North Carolina.

Details of provisions in the proposed amendment were discussed and the following stipulations were adopted:

Dr. Eure moved, Dr. Towler seconded and it was duly carried, that in the above mentioned amendment, petitions for nominations to the Board of Dental Examiners be required to have not less than 15 signatures and not more than 30 signatures. Furthermore, that nominations be limited to dentists who have been in active practice in North Carolina for at least the previous ten years.

Dr. Eure moved, Dr. Butler seconded and it was duly carried, that the amendment require nominations to be submitted prior to a date to be determined by the Board, and that ballots be mailed 30 days prior to the counting of the ballots. Other details of the amendment informally agreed upon included suggestions that:

There be six members of the Board with two being elected each year for a term of three years; election ballots be numbered and signed; and qualified dentists who objected to signing their ballots would be extended the privilege of casting unsigned ballots at the office of the Board of Dental Examiners.

**Report of Committee on Dental Care of the Aged:** Dr. Pearson outlined the provisions of P. L. 86-778 (Social Security Amendments of 1960) and indicated that legislation would be sought at the next session of the North Carolina General Assembly to permit North Carolina to participate in the provisions of this act. He also indicated that Dr. Ellen Winston, Commissioner of Public Welfare, had asked for a decision by Wednesday, December 7, 1960, on whether the Dental Society would agree to participate and furnish dental care under the provisions of this legislation.

After considerable and lengthy discussion it was noted that this legislation was another step in the direction of socialized medicine and that the AMA and the Medical Society of the State of North Carolina had endorsed this bill which constituted a complete reversal of their policies in the past. It was suggested that even though the dental profession may not like the program, that by offering its co-operation the profession might be in a better position to contain the services to be provided within reasonable bounds.

On motion by Dr. Towler, seconded by Dr. Eure and duly carried, the following resolution was adopted:

The Executive Committee of the North Carolina Dental Society on December 3, 1960, considered and studied the provisions of P.L. 86-778 (Social Security Amendments of 1960) passed by the 86th Congress of the United States which provides for furnishing medical and dental as-

sistance to citizens 65 years of age and above, and recognized the responsibility of the dental profession in providing dental care for the aged under the provisions of this legislation.

Therefore, we urge the State of North Carolina to enact such legislation as may be necessary to permit this state to participate in this program; and further, we empower and authorize the Committee on Dental Care of the Aged of the North Carolina Dental Society to offer its services to the State of North Carolina in the formulation and implementation of plans and policies to utilize the benefits of this legislation.

**Report of Science Fair Committee:** Dr. Spoon read a letter from Dr. C. E. Crandell, Chairman of the Science Fair Committee, urging the Society to support the Science Fair movement in North Carolina in two ways: (1) by urging individual dentists to give advisory support to participants in local science fairs; and (2) by supporting the program with an annual general contribution of \$100.00 to the Academy. Dr. Crandell pointed out that support of the Society in both these areas would materially assist in the recruitment of better qualified dental students.

Dr. Isenhower moved, Dr. Gay seconded and it was duly carried, that the Society contribute \$100.00 to the program this year.

**Adjournment:** There being no further business the meeting was adjourned at 1:50 a.m. on motion by Dr. Eure, seconded by Dr. Isenhower.

S. BYRON TOWLER, D.D.S.  
Secretary-Treasurer

*Read and approved January 7, 1961*

### THE CAROLINA, PINEHURST, NORTH CAROLINA January 7, 1961

**Call to Order:** The Executive Committee convened at The Carolina, Pinehurst, North Carolina, Saturday, January 7, 1961. Dr. Riley E. Spoon, Jr., called the meeting to order at 8:15 p.m. Dr. Luther H. Butler led prayer.

**Roll Call:** Members of the Executive Committee present were: Drs. Riley E. Spoon, Jr., Chairman; Darden J. Eure, S. H. Isenhower, W. B. Sherrod, Luther H. Butler, Norman F. Ross, S. P. Gay and S. B. Towler.

Others present were: A. M. Cunningham, Executive Secretary and Miss Mira Riddle, Central Office Secretary.

**Approval of Minutes:** On motion by Dr. Towler, seconded by Dr. Sherrod, the minutes of December 3, 1960, as previously distributed to the committee in mimeographed form were approved.

**Financial Report:** The report of the Secretary-Treasurer of December 31, 1960, was received for information.

**Membership Report:** A report from the office of the Executive Secretary indicated that as of December 31, 1960, the Society had a total membership of 1,136. It was noted that this was a net gain of 49 members compared with a year ago, and a gain of 54 dues-paying (active) members.

The report indicated also that there were seven delinquent members at the end of 1960.

On motion by Dr. Butler, seconded by Dr. Sherrod and duly carried, it was made a matter of record that the following members had not paid 1960 dues by December 31, 1960:

First District: Dr. L. T. Russell, Asheville

Second District: Dr. J. G. Moore, Mooresville

Third District: Dr. C. D. Dawkins, Rockingham; Dr. Reid T. Garrett,

Rockingham; Dr. Ruta B. Paulson, Raleigh; Dr. Charles R. Strange, F.P.O., San Francisco

Fourth District: Dr. M. F. Townsend, Lumberton

Enforcement of Article V, Section 6 of the Bylaws, which would require these members to be dropped from the roll, will be held in abeyance until the Chairman of the Membership Committee has had an opportunity to contact them.

**Dental Care for the Aged:** A report on the progress of plans to implement the provisions of P.L. 86-778 in North Carolina was presented by Dr. Spoon and Mr. Cunningham. They noted that at the invitation of the Medical Society of the State of North Carolina, representatives of dentistry, pharmacy and hospital administrators were co-operating with medicine in the drafting of legislation to be presented to the 1961 North Carolina General Assembly, which would create a Council on Medical Care for the Aged and define eligibility requirements. This would be in contrast to a bill to be proposed by the State Board of Welfare which would not specify eligibility requirements and would provide that the program be administered by the Board of Welfare.

On motion by Dr. Eure, seconded by Dr. Towler and duly carried, the Committee on Dental Care for the Aged was authorized to offer to pay the Medical Society of North Carolina a reasonable proportionate share of the legal expenses involved in the drafting of legislation pertaining to P.L. 86-778. Mr. Cunningham was instructed to contact the other two disciplines to determine what they considered to be the pro-rata share of the expenses incurred by the Medical Society in this project.

**Report from Legal Counsel:** Mr. Cunningham reported that legal counsel had completed a draft of amendments to the general statutes pertaining to election of members of the State Board of Dental Examiners and had submitted it to the Attorney General and the State Board of Elections for approval.

Legal counsel advised that the motion to dismiss filed by the Society in the case of Dr. Hawkins vs the Society had been denied by Judge Warlick and that by January 16 an answer to Dr. Hawkins' complaint would be submitted to the court.

Legal counsel warned that enabling legislation to permit the establishment of a dental service corporation presented a pitfall in that any broad provision would permit any qualified group to establish such a corporation.

It was moved by Dr. Butler, seconded by Dr. Ross and duly carried, that the Legislative Committee be informed of the warning of legal counsel in regard to enabling legislation which would permit establishment of a dental service corporation and that the Legislative Committee be instructed not to seek this legislation, pending further instructions by the Executive Committee. In the meantime, legal counsel and the Dental Service Corporation Committee would investigate the matter further and report their findings to the Executive Committee.

**Annual Session:** On motion by Dr. Butler, seconded by Dr. Sherrod, and duly carried, the Executive Secretary was authorized to employ the necessary help for registration at the Annual Session in May.

**Request from Editor-Publisher:** Dr. Sherrod moved, Dr. Butler seconded, that the expenses incurred by the Editor-Publisher during 1960 in the performance of his duties and submitted in a statement dated December 20, 1960, totalling \$150.00, be paid by the Secretary-Treasurer. The motion was carried.

**Transcript of 1960 Proceedings:** It was moved by Dr. Gay, seconded by Dr. Eure and duly carried, that the verbatim transcript of the Proceedings of the 1960 House of Delegates not be reproduced in mimeographed form. It was pointed out that copies of these proceedings were available in the Central Office for the inspection by members at their request.

**Adjournment:** On motion by Dr. Butler, seconded by Dr. Isenhower, and duly carried, the meeting was adjourned at 11:55 p.m.

S. B. TOWLER, D.D.S.  
Secretary-Treasurer

*Read and approved January 28, 1961*

### THE CAROLINA, PINEHURST, NORTH CAROLINA

(Joint Meeting with the Convention Committee)

January 8, 1961

**Call to Order:** The Executive Committee convened at The Carolina, Pinehurst, North Carolina, January 8, 1961. The meeting was called to order at 10:05 a.m. by President Luther H. Butler. Dr. Darden J. Eure led in prayer.

**Roll Call:** Members of the Executive Committee present were: Drs. Riley E. Spoon, Jr., Chairman; Darden J. Eure, S. H. Isenhower, W. B. Sherrod, Luther H. Butler, Norman F. Ross and S. Byron Towler.

Members of the Convention Committee present were: Drs. E. C. Schiebel, Chairman; E. D. Baker, Entertainment; W. Penn Marshall, Exhibits; R. Bruce Warlick, Golf; R. S. Hunter, Housing; R. A. Daniel, Jr., Monitor; A. Dwight Price, N. C. Dental Hygienists' Association; C. H. Teague, Program; C. A. Pless, Jr., Scientific Exhibits; T. L. Dixon, Superintendent of Clinics; Pearce Roberts, Jr., Visual Education.

Others present were: Drs. B. B. Sapp, Jr., and Paul Fitzgerald, Jr.; Mr. A. M. Cunningham, Executive Secretary and Miss Mira Riddle, Central Office Secretary.

**Convention Committee Reports:** Reports were submitted by members of the Convention Committee present.

Reports were also submitted in absentia for: Drs. R. B. Barden, Clinic; C. W. Poindexter, Hospitality; Marcus R. Smith, Necrology; C. A. Barkley, North Carolina Dental Assistants' Association; W. S. Peery, Projected Clinics; H. W. Moore, Skeet Shoot.

Dr. Butler thanked the members of the Convention Committee for their diligence in preparing for the annual session and the excellence of their reports.

**Executive Session:** The Executive Committee went into executive session with Dr. Spoon presiding.

**Annual Session Budget for 1961:** Dr. Eure moved, Dr. Ross seconded and it was duly carried, that the following budget for the 1961 Annual Session be adopted.

Convention .....	\$ 1,760.00
Exhibits .....	1,625.00
Entertainment .....	800.00
Housing .....	70.00
Necrology .....	40.00
* Program .....	2,000.00
** Hospitality .....	100.00
Publicity .....	250.00
Superintendent of Clinics.....	40.00
Golf .....	40.00
Skeet Shoot.....	25.00
House of Delegates.....	250.00
<b>Total .....</b>	<b>\$ 7,000.00</b>

\* Includes an allocation of \$85.00 to Visual Education and Scientific Exhibits.

\*\* Includes the cost of renting a Hospitality Room.

**Adjournment:** On motion by Dr. Butler, seconded by Dr. Eure the meeting was adjourned at 1:15 p.m.

S. B. TOWLER, D.D.S.  
Secretary - Treasurer

*Read and approved January 28, 1961*

Speaker of the House, Ralph D. Coffey.



Edgar D. Boker, the new President-Elect.



Baxter B. Sapp, Jr. and ADA Speaker of the House, Gerald D. Timmons of Philadelphia.



## CENTRAL OFFICE, RALEIGH, NORTH CAROLINA

January 28, 1961

**Call to Order:** The Executive Committee convened at the Central Office, Raleigh, North Carolina, Saturday, January 28, 1961. Dr. Riley E. Spoon, Jr., called the meeting to order at 7:40 p.m. Dr. Luther H. Butler led in prayer.

**Roll Call:** Members of the Executive Committee present were: Drs. Riley E. Spoon, Jr., Chairman; Darden J. Eure, W. B. Sherrod, Luther H. Butler, Norman F. Ross, S. Byron Towler.

Others present were: Dr. H. Royster Chamblee, Chairman Legislative Committee; Col. W. T. Joyner and Mr. R. C. Howison, Jr., legal counsel; Mr. A. M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

**Approval of Minutes:** On motion by Dr. Eure, seconded by Dr. Butler, the minutes of January 7 and 8, 1961, as previously distributed to the Committee in mimeograph form, were approved.

**Report on Law Suit:** Col. W. T. Joyner reported that Judge Warlick had denied the Society's motion for dismissal of the complaint of Dr. Hawkins and that an answer to the complaint had been submitted to the court January 16, 1961.

Col. Joyner stated that a communication from the attorney for the plaintiff requested that the names of the current Society officers be substituted for those named in the original complaint of March 30, 1960. He advised the Society to agree to the stipulation.

Dr. Sherrod moved, Dr. Butler seconded and it was duly carried, that the Society consent to the stipulation.

**Amendment to Dental Practice Act:** Col. Joyner and Mr. Howison informed the Committee that a draft of the amendment to the Dental Practice Act changing the method of election of members of the North Carolina State Board of Dental Examiners had been approved by the Attorney General and the State Board of Elections.

They advised that it would be submitted to the Legislature as soon as the senate and house committees were appointed.

**Report of Legislative Committee:** Dr. Chamblee reported that a list of liaison dentists who will contact state legislators in behalf of bills of interest to the dental profession when necessary, was being compiled by the Legislative Committee and at the present time the list was about 80 per cent complete. He noted that this was the first time such an organization had been effected on a state level.

Dr. Chamblee also reported that contact had been made with nearly every dental laboratory in the state urging that they co-operate with the Society in opposing any laboratory licensure legislation which may be introduced.

**Report of Membership Committee:** Dr. Ross reported that he had written a personal letter to the seven members failing to pay their 1960 dues by December 31. (See minutes of January 7) and that the response had been good. Dr. L. T. Russell had now paid 1960 dues and Dr. Ruta B. Paulson had paid 1960 and 1961 dues. He had also learned that Dr. J. G. Moore had moved out of the state and was now a member in good standing of the Tennessee State Dental Association. Further, Dr. M. F. Townsend had resigned but that his resignation had not been forwarded to the Central Office by the district concerned. This leaves just three delinquent members out of seven unaccounted for in 1960.

Dr. Ross moved, Dr. Eure seconded and it was duly carried, that the Chairman of the Membership Committee prepare a letter to be sent together with a statement to all members who had not paid their dues by March 1.

**Report of Committee on Medicare:** Mr. Cunningham reported that a communication had been received from the commanding officer of Camp LeJeune requesting clarification of the Society's position on Medicare as outlined in a letter from the Society to the Commanding Officer of Camp LeJeune June 29, 1960, granting authority to provide dental care for dependents of service personnel.

Mr. Cunningham also advised that dentists in the Jacksonville area had objected to the Society's permitting the classification of Camp LeJeune as a Remote Area for purposes of dental care, and that Dr. Lineberger and he were to meet with Jacksonville dentists February 8 to attempt to resolve the matter.

**Report of Insurance Committee:** Mr. Cunningham submitted a report from Dr. E. L. Eatman, Chairman of the Insurance Committee, advising that the committee had approved the addition of a 24-hour Accidental Death and Dismemberment Coverage by the carriers of the Society's Major Medical Expense Group Policy and requesting the Executive Committee to approve the proposal.

On motion by Dr. Towler, seconded by Dr. Sherrod and duly carried, the Executive Committee approved the addition of the above mentioned proposal to the Society's Major Medical Expense group policy.

**Report of State Institutions Committee:** Dr. Butler reported that Dr. E. D. Baker, Chairman of the State Institutions Committee, had advised that his committee was attempting to secure dental representation on the North Carolina Hospital Board of Control as requested by the 1960 House of Delegates.

**Request from the Editor-Publisher:** Dr. Ross reported that Editor-Publisher C. C. Diercks had asked Dr. Ross to request the Executive Committee to consider the appointing of an Associate Editor.

Dr. Ross moved, Dr. Butler seconded and it was duly carried that the Executive Committee concur with the request of the Editor-Publisher that an Associate Editor be appointed and requested the Editor-Publisher to submit nominees for the position for consideration by the Executive Committee.

**Report of Committee on Dental Care for the Aged:** Dr. Spoon reported that Dr. Pearson, Mr. Cunningham and he had met numerous times with representatives of medicine, pharmacy and the hospital administrators in the preparation of legislation which will enable North Carolina to participate in the federal program of Medical Care for the Aged. These four health disciplines had agreed that such legislation should provide for the establishment of a Council composed of members of the health professions which would render service under the program plus representation from the County Commissioners and the public-at-large. He pointed out that the Department of Public Welfare is expected to propose legislation which would permit the Department itself to administer the program.

**Adjournment:** On motion by Dr. Butler, seconded by Dr. Eure and duly carried, the meeting was adjourned at 11:55 p.m.

S. BYRON TOWLER, D.D.S.  
Secretary-Treasurer

*Read and approved March 16, 1961*

**CENTRAL OFFICE, RALEIGH, NORTH CAROLINA**  
**March 16, 1961**

**Call to Order:** The Executive Committee convened at the Central Office, Raleigh, North Carolina, Thursday, March 16, 1961. Dr. Riley E. Spoon, Jr., called the meeting to order at 12:50 p.m. Mr. Cunningham led in prayer.

**Roll Call:** Members of the Executive Committee present were: Drs. Riley E. Spoon, Jr., Chairman; W. B. Sherrod, Luther H. Butler, Norman F. Ross, S. P. Gay and S. Byron Towler.

Others present were: Dr. C. C. Diercks, Editor-Publisher; Dr. H. Royster Chamblee, Chairman, Legislative Committee; Dr. J. Homer Guion, Secretary, North Carolina State Board of Dental Examiners; Mr. A. M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

**Legislation proposed by Board of Dental Examiners:** Dr. Guion outlined legislation to be presented to the General Assembly by the State Board of Dental Examiners which would: (1) Provide reciprocity of licensure with states who reciprocate with North Carolina; (2) Provide a mandatory prescription law governing all work performed by dental laboratories for dentists; (3) Increase the annual license renewal fee from \$5.00 to \$8.00; (4) Increase the fee for duplicating a license from \$2.00 to \$5.00.

He explained that this legislation would be introduced as soon as the bill amending the laws pertaining to election of members of the Board had been passed. He emphasized that the Board's expenses were now more than its income, and in the event the bill amending the method of election of Board members was passed, the expenses of the Board would be even greater. Thus, an increase in fees was a necessity.

**Report of Dental Advisory Committee to UNC:** The committee recommended that the Executive Committee approve the committee's resolution that the School of Dentistry, University of North Carolina, be encouraged to participate in research in the training of dental hygienists and dental assistants to determine more precisely their individual roles as members of the dental health team and thus enlarge the dental profession's capacity for service to the people of this country, consistent with resolutions adopted by the American Dental Association (10-1960-H and 11-1960-H).

On motion by Dr. Gay, seconded by Dr. Sherrod and duly carried, the committee's recommendation was adopted.

It was also noted that the U. S. Navy had expressed an interest in financing and supplying personnel to conduct a pilot research study at the UNC School of Dentistry to determine the precise roles of Navy dental auxiliary personnel in accordance with resolutions 10-1960-H and 11-1960-H adopted by the ADA House of Delegates. The committee recommended that such a program be endorsed by the Executive Committee and submitted to the House of Delegates for approval.

On motion by Dr. Sherrod, seconded by Dr. Towler and duly carried, this recommendation of the committee was approved.

**Approval of Minutes:** On motion by Dr. Butler, seconded by Dr. Sherrod, the minutes of January 28, 1961, as previously distributed to the committee in mimeograph form, were approved.

**Report of Committee on Dental Care for the Aged:** Dr. Spoon reported that enabling legislation to permit North Carolina to participate in the Kerr-Mills Bill had been prepared jointly by representatives of medicine, dentistry, pharmacy, hospital administrators and county commissioners. The main feature of this bill was the establishment of an advisory council to administer the program, said council to be composed of representatives of the health disciplines which will render services under the program. It was noted that the Medical Society would not approve of vendor payment for medical services under the plan.

On motion by Dr. Butler, seconded by Dr. Gay and duly carried, the Legislative Committee was instructed to actively co-operate with the Medical Society in supporting this bill in the 1961 General Assembly.

It was noted that in the minutes of January 7, 1961, the Executive Secretary was instructed to contact the other health disciplines involved to determine the pro-rata share of each of the expenses incurred by the Medical Society in drafting this legislation; and that the Committee on Dental Care of the Aged had been authorized to offer to pay to the Medical Society a reasonable proportionate share of the Medical Society in this joint project.



**Tax on Prosthetic Appliances:** The Executive Secretary advised that the Governor's proposed "across the board" sales tax would include a sales tax on dental appliances. On motion by Dr. Butler, seconded by Dr. Ross and duly carried, the Legislative Committee was instructed to oppose at the appropriate time any tax on prosthetic appliances.

**Televised Post Graduate Dental Programs:** The Executive Secretary reported that no North Carolina TV stations would carry a commercially sponsored, closed-circuit, televised post graduate course for dentists on April 26, and that the Raleigh Dental Society had appointed a committee to look into the matter. It was agreed that because the event was commercially sponsored there was little that could be done on a state level at this late date and the matter was received for information.

**Anti-Fluoridationists Demand Equal Air-Time:** The Executive Secretary reported that on February 18, WUNC-TV had carried a panel program on fluoridation in North Carolina with members of the State Board of Health participating. Subsequently, equal time had been demanded by anti-fluoridationists. WUNC-TV replied that any discussion of the fluoridation problem would be restricted to those whose professional competence was unquestioned, but FCC had warned that WUNC-TV could not refuse equal air-time on this basis. The NCDS Secretary-Treasurer had written a letter supporting the University's stand on this question. The report was received for information.

**Request of N. C. Psychologists Association:** A letter from the North Carolina Psychologists Association requested endorsement by the Society of a proposed bill which would establish a board to examine and certify psychologists in North Carolina. The Executive Secretary was instructed to verbally inform the Psychologists Association that the Dental Society could not give active support to the legislation at this time.

**Cooperation with PTA Urged:** Dr. Butler reported that by invitation he attended a meeting in Raleigh, March 3, of the State Parent-Teachers Association. A comprehensive health program for school children was discussed. Dr. Butler was of the opinion that the Society should cooperate fully with the PTA in promoting such a program. The report was received for information.

**Training Program for Laboratory Technicians:** Dr. Butler reported that he attended a meeting of the Board of Education of the Durham City Schools, March 13. Others in attendance included: Drs. B. B. Sapp, Jr., Guy R. Willis and T. L. Dixon of Durham; Fred Noble of Raleigh, Robert Woodward and Margaret Woodward of Greensboro. The group presented the views of dentistry and laboratory people in support of the dental technicians training program to be established at the Industrial Education Center in Durham. The Board indicated it would take official action on the matter in the next week or two. The report was received for information.

**Dental Member of State Board of Health:** It was noted that the term of Dr. Z. L. Edwards as the dental member of the North Carolina State Board of Health would expire June 1, 1961. Dr. Sherrod moved, Dr. Towler seconded and it was duly carried that Dr. Edwards be recommended to Governor Sanford for reappointment for a term of four years as dental member of the State Board of Health upon the expiration of his current term.

**Enabling Legislation for Dental Service Corporation:** The Executive Secretary reported that enabling legislation to permit establishment of a dental service corporation in North Carolina would be introduced after the proposed amendment changing the method of election of the State Board of Dental Examiners had been acted upon by the General Assembly. He pointed out that legal counsel had warned that enabling legislation would present one pitfall in that it would allow any recognized dental group to establish a dental service corporation and not just the North Carolina Dental Society.

**Tribute to Deceased Members:** At Dr. Spoon's request members of the Executive Committee observed a minute of silent prayer in memory of four past presidents and other members who had died during the past year. The past presidents included: Drs. A. C. Current, S. R. Horton, D. L. Pridgen and B. N. Walker.

**Date of Next Executive Committee Meeting:** It was unanimously agreed that the Executive Committee would meet next at Pinehurst the evening of Saturday, May 13, unless there was a necessity for a called meeting in the meantime.

**Adjournment:** On motion by Dr. Sherrod, seconded by Dr. Gay, the meeting was adjourned at 5:05 p.m.

S. BYRON TOWLER, D.D.S.  
Secretary-Treasurer

*Read and approved May 13, 1961*

## THE CAROLINA, PINEHURST, NORTH CAROLINA

May 13, 1961

**Call to Order:** The Executive Committee convened at The Carolina, Pinehurst, North Carolina, Saturday, May 13, 1961. Dr. Riley E. Spoon, Jr., called the meeting to order at 9:05 p.m. and led in prayer.

**Roll Call:** Members of the Executive Committee present were: Drs. Riley E. Spoon, Jr., Chairman; Darden J. Eure, S. H. Isenhower, W. B. Sherrod, Luther H. Butler, Norman F. Ross, S. P. Gay, and S. B. Towler.

Others present were: Dr. Gerald D. Timmons, Speaker of the House, American Dental Association; Dr. William A. Garrett, Trustee, Fifth District, American Dental Association; Dr. Ralph D. Coffey, Speaker of the House, North Carolina Dental Society; Dr. Charles H. Teague, Program Chairman; Dr. Pearce Roberts, Jr., A. M. Cunningham, Executive Secretary; and Mira Riddle, Central Office Secretary.

**Introduction of ADA Guests:** Dr. Spoon introduced Dr. Timmons and Dr. Garrett and welcomed them to the meeting.

**Approval of Minutes:** On motion by Dr. Butler, seconded by Dr. Towler, the minutes of March 16, 1961, as previously distributed to committee members in mimeographed form, were approved.

**Report of Program Chairman:** Dr. Teague presented a resume of the program of the 105th Annual Session.

**Financial Report:** The report of the Secretary-Treasurer of April 30, 1961, was received for information.

**Report on Mail Ballot of March 20, 1961:** Mr. Cunningham reported that 8 ballots had been returned approving the recommendation of the Prosthetic Dental Service Committee, "that the North Carolina Dental Society co-operate with the UNC School of Dentistry in co-sponsoring short courses for dental laboratory technicians, at the UNC School of Dentistry." This action was made a matter of record.

**Training Program for Dental Laboratory Technicians:** Dr. Ross reported that on April 10, 1961, the Board of Education of the Durham City Schools voted unfavorably on the establishment of a training program for dental laboratory technicians. However, at the request of the Society officers and the Durham-Orange County Dental Society, the Board reconsidered the question on May 8, 1961, and approved the project.

**Classification of Retired Member:** On motion by Dr. Ross, seconded by Dr. Towler, and duly carried, Dr. T. W. Atwood of Durham, a member of the Third District, was classified as a Retired Member. The Executive Committee of the Third District had previously approved his application to be placed in this category.

**Legislative Program:** Mr. Cunningham reported on the legislative objectives of the Society in the 1961 North Carolina General Assembly. He stated that:

(1) Amendments to the General Statutes providing for the election of members of the Board of Dental Examiners by all dentists licensed to practice and residing in North Carolina (SB45) had been ratified by the General Assembly April 27.

(2) Amendments to the General Statutes providing for a mandatory prescription law governing all work performed by dental laboratories; the elimination of the requirement that notice of annual and special meetings of the Board of Dental Examiners be published in newspapers; an increase in the fee for annual renewal of a license from \$5.00 to \$8.00 and in the fee for duplicating a license from \$2.00 to \$5.00; and a change in the final date for renewal of a license from June 30 to March 31 (SB228) had been ratified by the General Assembly May 11, 1961, and would be effective July 1, 1961.

(3) A bill to establish a board of examiners to license laboratory examiners (HB 699) was introduced in the House by the North Carolina Dental Laboratory Association May 11. The Legislative Committee was prepared to vigorously oppose this proposal.

(4) Enabling legislation to permit the establishment of a dental service corporation was being drafted and would be introduced in the legislature at the first practicable opportunity.

(5) The Society had co-operated with the Medical Society, the Pharmaceutical Association and the Hospital Association in the drafting and introduction of HB 384 to enable North Carolina to establish a Medical Assistance for the Aged program under the Kerr-Mills Bill.

**FCC Ruling on Air-Time for Opponents of Fluoridation:** Mr. Cunningham read a communication dated March 31, 1961, from Dr. Donald B. Anderson, Vice President of the University of North Carolina, in which he stated that the Federal Communications Commission had directed the University to make equal air-time available to opponents of fluoridation. Dr. Anderson explained that the University was planning to present over WUNC-TV a program of thirty-minutes during which time opportunity for speakers opposing fluoridation of public water systems may present their point of view in order to comply with FCC regulations. In order to forestall criticism of the University, Dr. Anderson requested that reasons for this broadcast be publicized in the publications of the Society, in order that the members might better understand why such a program will appear on the University station.

On motion by Dr. Ross, seconded by Dr. Butler, and duly carried, the Executive Secretary was directed to inform the membership through the Newsletter that the University was to present a program opposing fluoridation in order to comply with FCC regulations.

**Letter from Governor Sanford:** Mr. Cunningham read a letter from Governor Sanford dated May 4, 1961, acknowledging receipt of a communication from the Society recommending the reappointment of Dr. Z. L. Edwards to the State Board of Health. The letter was received for information.

**Resignation of Dr. W. T. McFall:** Dr. Butler read a letter from Dr. W. T. McFall advising that it would be necessary for him to tender his resignation as a Delegate to the ADA. Dr. McFall's term would expire in 1962. Dr. McFall indicated that because of a contemplated move to undertake work outside the state, he would be unable to complete his current term as an ADA Delegate.

Dr. Butler moved that Dr. McFall's resignation be accepted with re-

gret and a delegate to the ADA to serve for the unexpired term of Dr. McFall be elected at the General Session on Monday night May 15, 1961. Dr. Gay seconded the motion and it carried.

**Printing of Report of Board of Dental Examiners:** Dr. Spoon recognized Dr. Ralph D. Coffey, Speaker of the House. Dr. Coffey raised the question of the printing of the Annual Report of the State Board of Dental Examiners in the transactions issue of the JOURNAL. He expressed the opinion that in view of the recent changes in the General Statutes relative to the election of members of the Board that perhaps it would be wise in the future to eliminate the Board's annual report from the printed transactions. No action was taken on this.

**Legal Counsel to Report at General Session:** Mr. Cunningham suggested that legal counsel be invited to speak before the Society at the General Session on Monday night and explain the procedure of nomination and election of Board members under the new law. Dr. Butler moved that legal counsel be allowed this privilege. Dr. Towler seconded the motion and it carried.

**Report on Housing:** Mr. Cunningham reported that reservations at The Carolina were considerably less than in previous years and stressed the obligation of the Society to co-operate with the hotel management in keeping the headquarters hotel filled as near to capacity as possible during the Annual Session

Dr. Butler moved that all rooms in The Carolina not occupied by 5:00 p.m. be released to the hotel without restriction. Dr. Isenhower seconded the motion and it carried.

**Announcement of Next Meeting:** Dr. Spoon announced that the next meeting of the Executive Committee would be held in the Dutch Room of The Carolina at the close of the Annual Session on Wednesday, May 17.

**Expression of Thanks:** Dr. Butler thanked Dr. Spoon for his services as Chairman of the Executive Committee. He also expressed his appreciation for the services of Dr. Isenhower, Dr. Gay and Dr. Sherrod whose terms on the committee would expire at the close of this administration.

Dr. Spoon thanked the members of the committee for their fine support and co-operation during the past year.

**Announcement of New Chairman:** Dr. Spoon announced that Dr. Pearce Roberts, Jr., would succeed him as Chairman of the Executive Committee during the coming year.

**Adjournment:** On motion by Dr. Isenhower, seconded by Dr. Eure, the meeting was adjourned at 12 midnight.

S. BYRON TOWLER, D.D.S.  
Secretary-Treasurer

*Read and approved July 8, 1961*

## Obituaries

ALFRED CORNELIUS CURRENT, D.D.S.  
BENJAMIN JASPER DURHAM, D.D.S.  
SYLVESTER ROBERT HORTON, D.D.S.  
WILLIAM ARTHUR INGRAM, D.D.S.  
ALEXANDER TUNNELL JENNETTE,  
D.D.S.  
DAVID KELLY LOCKHART, D.D.S.  
DALLAS LEROY PRIDGEN, D.D.S.  
ALONSO JOSEPHINE PRINGLE, D.D.S.  
CHARLES ROBERTS RIDDICK, D.D.S.  
JOHN SWAIN, D.D.S.  
BERNARD NEWMAN WALKER, D.D.S.  
CHARLES MAURICE WHEELER, D.D.S.

### ALFRED CORNELIUS CURRENT, D.D.S. 1896-1960

Dr. Alfred Cornelius Current, prominent Gastonia dentist, was killed October 23, 1960, in an automobile accident. He was sixty-four years of age.

Dr. Current may not have lived as long a life as some but his deeds spoke of a great and full one.

In his chosen profession, dentistry, he was a continual leader from the time of his freshman year in Atlanta Southern Dental College until the day he died. He served as president of his local district and state societies in 1952 and 1953. His work in the field of dentistry was one of continued interest, and he served on many committees in that field. He served for seven years on the State Board of Dental Examiners and on the State Board of Health under three governors and was its chairman in 1944-1945. He was an excellent clinician and gave many clinics in the South.

His outstanding interest in the dental field was pursued in helping to establish the School of Dentistry at the University of North Carolina at Chapel Hill, N. C. Dr. Current introduced the resolution before the North Carolina Dental Society to have the society crusade for the school. He served as Publicity Chairman for two years in this specific assignment creating an outstanding interest in the school movement. He gave the initial effort at Ashley High School in Gastonia, and served on the Dental College Committee from the time of its creation until the school of dentistry was established.

Dr. Current was one of the incorporators of the Dental Foundation, which is dedicated to the advancement of dentistry and to dental research. He also served as a member of the research committee.

In the civic world he was sensitive to the needs of the community. He was a member of the Rotary Club for thirty-five years and was its president in 1946-1947. He started a Rotary Student Fund that year which is still very active. He was a member of the Elks Club and the Gaston Country Club.

Dr. Current enjoyed many hobbies including hunting, fishing and wood-working. In the woodworking art, he achieved distinction and created many beautiful patterns of inlaid furniture. He presented to the School of Dentistry a fine walnut bookstand. This artistic piece of furniture is in the lobby of the School of Dentistry and is used to encase the Dental Foundation Memorial book.

Dr. Current was an active member of the First Baptist Church. He was ordained a Deacon in 1939 and was serving in that capacity at

his death. For a number of years, he served as Chairman of the Board of Deacons and was a Church Trustee. For many years he taught a Bible Class and was the first president of the Brotherhood. In the growth and development of the First Baptist Church into a large church, his name stands among the choice leaders. He was chairman of a special committee for the purchase of the Associate Pastor's home. He and his family donated the property where the parsonage is located. He was an active member of the Building Committee for the construction of a large educational building. At the time of his death, he was co-chairman of the Forward Finance Program which eventuated the largest budget the Church ever adopted. Whatever the church promoted in the line of progress, he was one of the leaders.

He is survived by his wife, Vera McDuffie Current, two sons, Dr. A. Cornelius, Jr., and Dr. William Ange Current, one daughter, Mrs. Molly Current Terry, and a foster daughter, Mrs. Myra Cochran Doster, and six grandchildren. He was devoted to his home and spent himself very affectionately with his wife and children. To this end, he gave himself unsparingly in time, energy and interest. His home contains many fine pieces of furniture on which he spent hundreds of hours in making.

AMOS S. BUMGARDNER, D.D.S.

BENJAMIN JASPER DURHAM, D.D.S.  
1879-1960

Benjamin Durham was born October 23, 1879, in Asheville. He was educated in the schools of Asheville and entered the University College of Medicine and Dentistry in Richmond. He was graduated from Atlanta Dental College in 1901.

He practiced in Asheville with his father until he entered military service during World War I in 1916. He married Fannie Linsey Davis of Richmond, Virginia.

He served in the Mexican Border Clash in 1916-17, and then overseas in France and Germany with the 30th Division until 1919, receiving the Victory Cross Medal.

Dr. Durham remained in government service as chief of Dental Clinics at Oteen, North Carolina; Prescott, Arizona; Chicago, Illinois; Columbia, South Carolina and finally in Virginia. He retired a Lieutenant Colonel and entered private practice in Southern Pines in 1946. He died June 4, 1960.

R. BRUCE WARLICK, D.D.S.

SYLVESTER ROBERT HORTON, D.D.S.  
1880-1960

Dr. Sylvester Robert Horton was born January 23, 1880, in Wake County, North Carolina. He was one of six children of Mr. and Mrs. Sydney L. Horton.

Robert was graduated from Wakelon High School and attended Wake Forest College. He studied medicine and dentistry at the University College of Medicine in Richmond, Virginia, completed his course in dentistry at the University of Maryland, and was graduated in 1905. He was one of three brothers who practiced professionally in Raleigh. The others were: Drs. W. C. and M. C. Horton, physicians. He is survived by his wife, the former Miss Lillian Jordan of Isle of Wight, Virginia; a brother, Roger Horton of Phoenix, Arizona; and a host of friends who mourn their loss.

Robert served as President of the North Carolina Dental Society in 1923 and the Raleigh Dental Society in 1931. He was the first Dental Officer commissioned by the United States Government for National Guard Service in the United States.

He took an active part in the city's business affairs. He was a founding director of the Morris Plan Bank of Raleigh, a charter member of the Raleigh Kiwanis Club and the Raleigh Golf association and a member of the First Baptist Church.

Robert possessed a magnetic personality and charm. He was held in high esteem by his many friends. His loyalty to his profession, friends, family and to his high principles and ethics stood out like a lighted beacon in the night.

H. ROYSTER CHAMBLEE, D.D.S.

WILLIAM ARTHUR INGRAM, D.D.S.

1903-1961

William A. Ingram was born in Kershaw, South Carolina, April 22, 1903.

He attended the Kershaw Public Schools, Oak Ridge Military Academy and the University of Maryland School of Dentistry from which he was graduated in 1925.

He practiced in Cheraw, South Carolina, until 1931 and moved to Monroe, North Carolina, where he practiced until his death.

Dr. Ingram was married to the former Pearl Fisher of Faith, North Carolina, in 1934.

He died on May 1, 1961, and was buried in Faith, North Carolina.

WILLIAM H. MCLEOD, D.D.S.

ALEXANDER TUNNELL JENNETTE, D.D.S.

1905-1960

A. T. (Sandy) Jennette was born in Washington, North Carolina, on October 11, 1905. Early in his teens he acquired a deep respect and love for dentistry as a result of family associations with and visits to the office of his uncle, the late Dr. Rhodes Gallagher, then considered to be outstanding in his profession, especially in the field of Operative Dentistry. This inherited trait of love for dentistry, respect for honesty and integrity, as well as a keen sense of appreciation for excellence in the performance of duty, was reflected in his dealings with and services to his patients throughout his professional career.

He was graduated from the Baltimore College of Dental Surgery, Dental School, University of Maryland, in 1927. After receiving his license to practice he located in the town of his birth where he was not long in building a busy practice. His excellence in operative procedures and his dedication to the high ethical standards and ideals of his profession were to win for him the admiration and respect not only of his patients, but of his fellow dentists, especially those who had the privilege of practicing in the same community with him. I never looked upon him as a competitor, but as a friend and colleague. As one who was privileged to practice across the street from his office throughout his years of practice, I can recall no occasion, or instance, when I ever had the slightest reason to question his ethics in either his business dealings or his professional relationships with his fellow dentists.

At the outbreak of World War II, he voluntarily gave up a busy practice, closed his office and entered the services of his country. As a dental surgeon in the 30th Division with the rank of Major, he served with honor and distinction in a cause he felt fully justified the many financial sacrifices he was making, to say nothing of the heartaches and anxieties caused by his absence from home and loved ones. In recognition of his patriotism and services to his country in time of need he received six battle stars in the European Campaign and was awarded the Croix de Guerre by the French Government.

He was honored many times with high responsibilities in his professional organization. He served three terms as a member of the North Carolina State Board of Dental Examiners. In this important office he became recognized as an able and efficient examiner, always exacting, but sympathetic and fair with the applicants for licensure.

In church affairs he was a loyal and faithful member of the First Presbyterian Church of Washington and served in many important and official capacities. He was not only interested and active in church affairs, but took an active part in all civic activities designed for the

betterment and progress of the community. At the time of his death he was a member of the Washington City Council.

After several months of lingering illness, he died on October 9, 1960, and was interred in the family plot in Oakdale Cemetery. Of him it could be said: "He met life gallantly, with a smile on his lips and with faith in his heart."

Z. L. EDWARDS, SR., D.D.S.

DAVID KELLY LOCKHART, D.D.S.

1877-1960

David Kelly Lockhart passed away July 19, 1960, after an extended illness following a severe cerebral hemorrhage suffered on June 9, 1959.

Born January 18, 1877, in Orange County, North Carolina, he was the son of Levi Young Lockhart and Martha Jane Breeze Lockhart. His sister and four brothers had all predeceased him at the time of his death.

Dr. Lockhart was educated in the Orange County Schools and at Trinity Park School. He was graduated and received the degree of Doctor of Dental Surgery from the Medical College of Virginia in Richmond, Virginia, in 1905 and began his practice of dentistry in Asheboro in that year. In 1915 he opened his office in Durham in the Fidelity Bank Building where he enjoyed an extensive practice for 44 years.

Dave, as he was fondly known, was a Mason and a Shriner (Oasis Temple) for 50 years. He was a director of the Home Savings and Loan Association for 30 years, a member of Kiwanis, a Steward in Trinity Methodist Church and a member of the Julian S. Carr Bible Class of Trinity Church. He generously served on Selective Service Examining Boards in World Wars I and II and was visiting dentist on the staff of Watts Hospital. He was a loyal and active member of his profession. He was a member of the Orange-Durham County Dental Society, and a life member of the North Carolina Dental Society and the American Dental Association.

In 1922 Dr. Lockhart married the former Ruby Elliott who survives him, as do three children, David Jr., Caroline L. Gilbert and Mary Jane Lockhart all of Durham.

Dr. Lockhart was a sincere and conscientious man, truly a gentleman and of the old school, held high in esteem by his friends, colleagues and associates by whom he will be greatly missed.

CLAUDE A. ADAMS, D.D.S.

DALLAS LEROY PRIDGEN, D.D.S., F.A.C.D.

1895-1960

The JOURNAL of the North Carolina Dental Society of September 1960 was dedicated, most appropriately, to one of the society's former presidents and most popular members, Dr. D. LeRoy Pridgen of Fayetteville. On September 30, 1960, a few days after publication of this issue of the JOURNAL, Dr. Pridgen died at the age of 65.

Since Dr. Pridgen was born near my own boyhood home and was later associated with me for 23 years in the practice of dentistry, I knew him intimately and enjoyed his close friendship throughout his lifetime.

Dr. Pridgen was born in Godwin, Cumberland County, North Carolina, on April 28, 1895, the eldest son of the late D. L. and Lida Wade Pridgen. Before entering Atlanta-Southern Dental College, where he was graduated with a D.D.S. degree in 1919, he attended the elementary and high schools in Godwin. He also attended Davidson College where he finished his pre-dental course.

In 1920 he began the practice of dentistry in Fayetteville. His competence in his profession, his quiet and friendly manner, his interest and participation in social, civic and business affairs here through 42 years won for him a host of devoted friends. He was a charter member and past president of the Fayetteville Kiwanis Club, a member of the Cumberland County Board of Health, an Elder of the First Presby-



terian Church of Fayetteville. He was a man who gave himself with devotion to his profession, his family, his community, and his church.

Dr. Pridgen's service to his profession was noteworthy. He was the first president of the Fourth District Dental Society, 1920-1921. A member of the North Carolina Dental Society, he served as its secretary-treasurer 1932-1936, and as its president 1926-1927. He was a member of the North Carolina State Board of Dental Examiners from 1942-1951. He held always the esteem and admiration of his colleagues and was faithful in his service to organizations and causes designed for the welfare of the dental profession.

Dr. Pridgen is survived by his wife, the former Mildred Vick of Godwin, to whom he was married October 29, 1919, and a son, Dr. Edward Neece Pridgen.

To them and other relatives, we, the members of the North Carolina Dental Society, extend our sincerest sympathy in their loss. At the same time we offer our congratulations to them upon their good fortune in the rich memories they will always cherish of him whose nobility of character meant so much to them and others through many years.

R. M. OLIVE, SR., D.D.S.

ALONSO JOSEPHINE PRINGLE, JR., D.D.S.

1897-1961

Born in Lawsonville, Stokes County, December 19, 1897, Alonso J. Pringle attended Guilford High School, and John Marshall Military Academy in Richmond. He received his pre-dental studies at Guilford College, and received his degree from the University of Louisville in 1929.

Dr. Pringle practiced a short time at Lawsonville and Walnut Cove. He then studied at Forsythe Dental Infirmary in Boston. He also attended the School of Public Health at the University of North Carolina, following which he served on the staff of the Oral Hygiene Department of the State Board of Health for several years.

About 1933, Dr. Pringle established an office in Greensboro and carried on a general practice until his death on January 16, 1961. He was a member of the North Carolina Dental Society and the American Dental Association.

Dr. Pringle was married to the former Maurine Tuttle of Summerfield, who, with one son, Alonso, III, survives. He was an ardent sportsman, particularly hunting and fishing. His many friends will miss his kind and jovial personality.

C. C. POINDEXTER, D.D.S.

CHARLES ROBERTS RIDDICK, D.D.S.

1874-1960

Charles Roberts Riddick was born in Gatesville, Gates County, North Carolina. He attended the Gatesville schools and Horner Military Academy, and was a graduate of Trinity College. He attended Baltimore College of Dental Surgery, from which he received his D.D.S. degree. He first practiced in Elizabeth City, and in 1907 he located in Ayden and practiced there until his retirement in 1948, following a heart attack.

Dr. and Mrs. Riddick moved to Glen Burnie, Maryland, in 1959 to make their home with their son.

Dr. Riddick was a member of the Ayden Methodist Church and at one time served on the Board of Stewards. He was a charter member of the Ayden Rotary Club and a former member of the Board of Directors of The First National Bank of Ayden.

Surviving are his wife, the former Gay Woodson of Ashland, Virginia, one son, William L. Riddick of Glen Burnie, Maryland.

H. W. GOODING, D.D.S.

JOHN SWAIM, D.D.S.

1878-1960

John Swaim died September 28, 1960, at the age of 82. He was born in Randolph County, near Liberty, March 2, 1878, the son of the late Roddy and Luch Brower Swaim.

Prior to entering dental school he was employed by International Harvester Company traveling over many states setting up harvesting machines. Later he engaged in selling nursery stock in Mississippi and other southern states.

He was married to Sally Curtis of Randolph County, who preceded him in death in 1958. Surviving is one daughter, Miss Louise Swaim of Asheboro.

After graduating from the dental department of Baltimore Medical College in 1913, he entered practice in Asheboro, continuing in practice until his retirement in 1948.

He was the oldest Mason in Asheboro, both in length of membership and in years of age, and he was honored with a life membership in 1957.

He was a Trustee and Steward of the Central Methodist Church. For 41 years he was a director of the Peoples Savings and Loan Association.

It was my privilege to be located in the same building with him for many years and we each had a key to the other's office, to enable us to borrow something at any time.

Always with a smile, witty and humorous, he will ever be remembered by those who were privileged to know and appreciate the warm friendship he held for his fellow man.

O. L. PRESNELL, D.D.S.

BERNARD NEWMAN WALKER, D.D.S.

1909-1961

Bernard Newman Walker, a past president of the North Carolina Dental Society and the Charlotte Dental Society, died March 7, 1961, at his home in Charlotte.

He was born in San Diego, California, in 1909 and was graduated from Atlanta Southern Dental College in June 1932.

Dr. Walker began his practice of dentistry in Meridian, Mississippi, and moved to Charlotte in 1934 where he maintained his practice until April 1942 when he entered upon active duty with the United States Army and served with the 38th Evacuation Hospital Unit in the European Theatre. After separation from the Army in 1945 with the rank of Major, he returned to Charlotte and limited his practice, until his death, to Periodontics.

He had from time to time held every office in the North Carolina Dental Society and served on its many committees untiringly. He was a graduate of Mississippi State College and Atlanta Southern Dental College, and a Diplomat of the American Board of Periodontology. He was a member of the American Academy of Periodontology, the Southern Academy of Periodontology, the American Dental Association, the Charlotte Dental Society, and a Fellow of the College of Dental Surgeons, and the American College of Dentists. There are few facets of dentistry in those crowning 29 years that he did not touch and influence greatly.

Dr. Walker was a member of the Myers Park Presbyterian Church and a Shriner.

Surviving besides Mrs. Walker are two daughters, Frances Ellen and Mary Lou, all of Charlotte. His ideals and principles have been translated into action to serve his profession and fellowman.

G. C. STOWE, JR., D.D.S.

CHARLES MAURICE WHEELER, D.D.S.

1884-1961

Charles M. Wheeler was born in Tarboro, North Carolina, in 1884, the son of John K. and Harriet Glenn Wheeler and the only brother of the late Dr. John H. Wheeler. He attended the Greensboro schools and became a salesman for J. W. Walker. He decided to study dentistry and entered Atlanta Dental College, graduating as an outstanding student in 1913. He conducted a private practice in Greensboro for 48 years before passing away on February 3, 1961 at the age of 77.

North Carolina has not produced a man more devoted nor sincere in his chosen profession. Dr. Wheeler was truly a talented and skillful master of his trade.

Dr. "Charlie" or "Uncle Joe," as he was affectionately called by his many friends, served as president of the Guilford County Dental Society, the Third District Dental Society, and was a member of the North Carolina Dental Society and the American Dental Association from 1913 until the time of his death. He was a charter member of the Civitans Club of Greensboro.

"There is no great and no small  
To the soul, maketh all;  
And where it cometh all things are  
And it cometh everywhere."

(*Waldo Emerson*)

T. E. SIKES, SR., D.D.S.

# Committee Reports

STANDING AND SPECIAL  
(In alphabetical order with action  
by House of Delegates)

## BLUE CROSS-BLUE SHIELD ADVISORY COMMITTEE

The Hospital Care Association of Durham has announced that an oral surgery endorsement is now available to its subscribers. It is identical to the one previously offered by the Hospital Savings Association of Chapel Hill a year ago.

The Endorsement to provide this additional coverage can be added to basic certificates at the following rates:

Monthly Rates	Individual	Parent & (1)Child	Family
Group .....	.15	.30	.40
Non-Group .....	.20	.40	.45

The Oral Surgical Benefits will be provided in accordance with the schedule of professional benefits. Benefits will be allowed whether the procedure is performed in the hospital, in the dentist's office, or in the home.

The schedule of allowances in both endorsements is also similar.

## RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

S. EVERETT MOSER (1963) *Chairman*

VAIDEN B. KENDRICK (1962)

F. D. BELL (1961)

**Action by House of Delegates:** Received for information, May 14, 1961.

## CANCER COMMITTEE

Because of the inability of the committee to meet prior to the 1961 State Meeting in Pinehurst, we have nothing to report.

## RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

GROVER C. HUNTER, JR., *Chairman*

GLENN BITLER

JOHN H. DIXON

Z. L. EDWARDS, JR.

F. GLENN GAITHER

**Action by House of Delegates:** Received for information, May 14, 1961.

## CANCER COMMITTEE Supplemental Report No. 1

It has been a privilege and inspiration to serve as Chairman of the Cancer Committee for the past year. Inspiration primarily from the knowledge of the fine spirit of co-operation existing between our Society and the North Carolina Division of the American Cancer Society with its very able and helpful staff.

At the Board of Directors Meeting of American Cancer Society in Raleigh, January 22, a report was submitted which included the following:

1. The appointment of a cancer committee at the local society level in Mecklenburg, which has the encouragement of the American Cancer Society.

2. The Second District of North Carolina Dental Society is planning a pilot oral detection program.

3. In co-operation with North Carolina Dental Society the brochure entitled "Your Family Dentist Can Detect It" was developed and distributed to dentists and lay groups.

4. The American Cancer Society has provided displays, films and literature each year for the Annual Meetings of the North Carolina Dental Society in Pinehurst.

5. Twelve hundred dentists receive Monographs and special issues of CA. At this same meeting it was suggested that senior dental students receive issues of CA.

The committee met in Pinehurst, May 14, 1961, and discussed ways and means of stimulating interest in detection of oral cancer at the local society level. It was the consensus that we lend encouragement in every way possible to the appointment of cancer committees at the local society level throughout the state.

Your chairman wishes to express his thanks for the support and assistance from all units of the American Cancer Society and from the members of his committee.

#### **RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

GROVER C. HUNTER, JR., *Chairman*

**Action by House of Delegates:** Report not received in time for consideration.

#### **CHILDREN'S DENTAL HEALTH WEEK COMMITTEE**

February 5-11, 1961, was observed as National Children's Dental Health Week and received wide publicity throughout North Carolina by means of television, radio, newspaper and outdoor advertising.

Dentists throughout the state spoke on children's dental health before P.T.A. groups, civic groups, and elementary school children. Radio and television stations presented spot announcements emphasizing Children's Dental Health Week and several of the daily newspapers carried feature articles and news items pertaining to preventive dentistry. Information packets and posters supplied by the Bureau of Dental Health Education of the American Dental Association were distributed by the committee to each of the five district societies for redistribution locally.

The State Board of Health's Division of Oral Hygiene sent posters to elementary classroom teachers throughout the state. The same poster was mailed to each dentist practicing in North Carolina for display in his reception room. The cost of this project was borne by the Division of Oral Hygiene with the exception of the expense of mailing to each dentist. Postage for this was given by the Ernest A. Branch Study Club.

The Demeritt Study Club, working in co-operation with the Fifth District Dental Society, presented a taped television program.

The North Carolina Dairy Council should receive credit for excellent co-operation with this committee and for their willingness to furnish free posters and pamphlets to any group desiring them. Their literature and material on children's dental health was considered excellent.

#### **RECOMMENDATIONS:**

It is recommended that District Committees for Children's Dental Health Week be appointed before the District Society meetings in the fall of the year. This would give the State Chairman and his committee an opportunity to correspond with each district chairman in order to determine the type and amount of material needed to properly promote Children's Dental Health Week. The bulk of the information, posters, and material available to the state is from the American Dental Association and their deadline for orders closely parallels the meeting dates of the district dental societies.

E. McK. HESTER, *Chairman*

T. G. COLLINS

MARION L. RALLS, JR.

DONALD L. HENSON

H. W. THOMPSON

**Action by House of Delegates:** The recommendation was amended and adopted May 15, 1961 to read:

"Because the bulk of information, posters, and materials available to the state is from the American Dental Association, and their deadline for orders closely parallels the meeting dates of the district dental societies; and in order to give the state chairman and his committee an opportunity to correspond with each district chairman to determine the type and amount of material needed to properly promote Children's Dental Health Week, therefore, it is recommended: that the incoming president of the North Carolina Dental Society consult with the president-elect of each district to select men who are mutually acceptable for service on both the state and district levels."

### CLINIC COMMITTEE

The Clinic Committee has arranged twenty-one table clinics for presentation at the State Meeting in Pinehurst for 1961. These clinics cover a wide variety of subjects and are presented by representatives from every district. Non-member participants are:

The N. C. Dental Assistants' Association

The N. C. Dental Hygienists' Association

Dental Officer of the Naval Dental Corps from Camp LeJeune.

### RECOMMENDATIONS:

1. That the Clinic Committee be re-named Table Clinic Committee to avoid confusion.

2. That the chairmen of the District Table Clinic Committees be members of this committee automatically.

R. B. BARDEN, *Chairman*

R. L. FALLS

HENRY O. LINEBERGER, JR.

F. C. SLAUGHTER

C. H. SUGG

### Action by House of Delegates:

Recommendation No. 1 withdrawn by Committee Chairman.

Recommendation No. 2 adopted May 15, 1961.

### CONSTITUTION AND BYLAWS COMMITTEE

Enactment of the recent law changing the method of election of the members of the North Carolina State Board of Dental Examiners has made certain sections of our Constitution and Bylaws obsolete. No longer are the members of the Board elected by the Society and commissioned by the Governor. The law now provides that they shall be elected by all registered dentists in North Carolina.

The Committee recommends that the Constitution and Bylaws be amended by deleting references to the Society electing members of the Board and the provision that the Board shall be represented in the House of Delegates.

Also, there are sections of the Constitution and Bylaws which are ambiguous. One case in point is the provision for amending the Constitution and Bylaws. This particular provision caused a good deal of debate on the floor of the House of Delegates last year. While the Committee would not be in favor of any hasty changes, it does recommend that the entire text of the Constitution and Bylaws be carefully reviewed and studied during the coming year by this committee. The results of that study should be presented to the 1962 House of Delegates. It may well be that the committee might find it necessary to submit a complete revision of the Constitution and Bylaws, eliminating all inconsistencies and ambiguities that may now exist.

The Committee has been advised by Dr. Butler that he will recommend a raise in state dues in his Presidential Address. This will require changes in the Constitution and Bylaws as reflected in the committee's recommendations.

Dr. R. B. Barden, Chairman of the Clinic Committee, has recommended that the name of the Clinic Committee be changed to Table Clinic Committee. Since the Table Clinic Committee is a standing committee, an amendment to the Constitution and Bylaws will be necessary to accom-

plish this. Dr. Barden states that "Table Clinic" would more clearly express the purpose and responsibilities of the committee.

### RECOMMENDATIONS:

1. Constitution. Article V — Examining Board. Delete the entire section.
2. Constitution. Article IX — House of Delegates. Delete the words "and two members of the North Carolina State Board of Dental Examiners."

Insert the word "and" before the words "dental member of the North Carolina State Board of Health."

3. Bylaws. Article II. House of Delegates. Section 4. Delete the words "and the examining board."

4. Direct the Constitution and Bylaws Committee to thoroughly study the Constitution and Bylaws for inconsistencies and ambiguities and recommend to the 1962 House of Delegates a complete revision of the Constitution and Bylaws.

5. That should the above study be directed, that no more copies of the Constitution and Bylaws shall be printed until after the 1962 House of Delegates.

6. Bylaws. Article V. Section 1 — Annual Dues. Strike out the words "twenty-five dollars" and substitute therefor the words "thirty-five dollars."

7. Bylaws. Article V. Section 4 — Recent Graduates. In the first sentence, strike out the words "twenty-five dollars" and substitute therefor the words "thirty-five dollars."

8. Constitution. Article VII — Standing Committees. Section 1. Delete "Clinic Committee" and substitute therefor "Table Clinic Committee."

9. Bylaws. Article I — Duties of Officers. Section 10. In the first sentence, delete the word "Clinic" and substitute therefor the words "Table Clinic."

Z. L. EDWARDS (1961) *Chairman*

MARCUS R. SMITH (1962)

RALPH L. FALLS (1963)

D. T. CARR (1964)

T. G. NISBET (1965)

### Action by House of Delegates:

Recommendations 1, 3, 4, 5, 6 and 7, adopted May 16, 1961.

Recommendation 2, amended and adopted May 16, 1961 to read:

"Constitution, Article IX — House of Delegates. Delete the words 'dental member of the North Carolina State Board of Health and two members of the North Carolina State Board of Dental Examiners, which members shall be elected annually by the Examining Board.' Insert the word 'and' after the words 'Executive Committee' and place a period after the words 'Ethics Committee'."

Recommendations 8 and 9, withdrawn.

### COMMITTEE FOR THE DENTAL CARE OF THE AGED

President Butler appointed the Special Committee for the Dental Care of the Aged in November, 1960. He instructed the committee to determine how P.L. 86-778 related to the citizens of North Carolina and the North Carolina Dental Society. The committee's recommendations were to be made to the Executive Committee of the Society.

#### Pinehurst, November 28, 1960

The Committee for the Dental Care of the Aged (CDCA) met with the Executive Council and the Chronic Illness Committee of the Medical Society of the State of North Carolina. The Medical Society indicated its desire that the Dental Society help draft a bill to implement the new medical assistance for the aged (MAA) program in North Carolina.

#### Raleigh, December 1, 1960

Representatives of the North Carolina Dental Society (NCDS) met with Dr. Ellen Winston, Commissioner of Public Welfare of North Carolina. Dr. Winston informed the group of the new MAA legislation and requested the Society to submit to her department estimates of the dental needs of the aged in North Carolina.

Following the meeting with Dr. Winston, members of the NCDS met at the Division of Oral Hygiene office. Those present were: the NCDS officers, members of the Legislative Committee, the Secretary of the State Board of Dental Examiners and other members of the NCDS. The group discussed the various problems associated with implementation of the MAA program. The majority voiced their desire to assist the Medical Society in drafting a health bill.

#### **Raleigh, December 3, 1960**

The CDCA of the North Carolina Dental Society submitted a report to the Executive Committee which adopted the following resolution:

"The Executive Committee of the North Carolina Dental Society on December 3, 1960 considered and studied the provisions of P.L. 86-778 (Social Security Amendments of 1960) passed by the 86th Congress of the United States which provides for furnishing medical and dental assistance to citizens 65 years of age and above, and recognized the responsibility of the dental profession in providing dental care for the aged under the provisions of this legislation.

"Therefore, we urge the State of North Carolina to enact such legislation as may be necessary to permit this state to participate in this program; and further, we empower and authorize the Committee on the Dental Care of the Aged of the North Carolina Dental Society to offer its services to the State of North Carolina in the formation and implementation of plans and policies to utilize the benefits of this legislation."

#### **Pinehurst, December 11, 1960**

The CDCA submitted a report to the District Officers' Conference and the House of Delegates. The House of Delegates adopted the above resolution.

#### **Raleigh, December 30, 1960**

The CDCA and President Butler met with a multi-discipline committee composed of representatives of: The Medical Society of the State of North Carolina, The North Carolina Dental Society, The North Carolina Hospital Association, The North Carolina Pharmaceutical Association and eventually The North Carolina County Commissioners' Association. It was determined at this meeting that the representative groups present differed with Dr. Winston and her department in the method of implementing the MAA program in North Carolina and decided it was necessary to draft a health bill to oppose the one already drafted by the Department of Public Welfare.

#### **Raleigh, January 5, 1961**

Selected members of the multi-discipline committee were appointed to meet with legal counsel of the Medical Society and the Hospital Association to draft a health bill which would, among other things, establish a Council on Medical Care of the Aged composed of representatives of the purveyors of services.

#### **Raleigh, January 7, 1961**

A progress report was made by CDCA to the Executive Committee of NCDS.

#### **Raleigh, January 16, 1961**

Dr. Ellen Winston requested the NCDS to submit final estimates for the dental program under MAA. The CDCA, following the instructions of the Executive Committee to assist in the implementation of the MAA program, forwarded estimates to Dr. Winston on the dental extractions needed and the cost of this service including examination and X-ray costs. These estimates were based upon national survey statistics, the only figures available at this time.

#### **Raleigh, January 25, 1961**

The multi-discipline committee met to study and revamp the original draft of the proposed health bill. The representatives of the County Com-



missioners' Association of North Carolina were present by invitation and openly discussed their problems relating to the care of the indigent patient.

**Raleigh, January 28, 1961**

A progress report was made by CDCA to the Executive Committee of the NCDS.

**Chapel Hill, February 15, 1961**

The CDCA of the NCDS met to further develop the MAA dental program. Since the January 25 meeting with the multi-discipline committee it had been learned, through an individual familiar with the policies of the Department of Health, Education and Welfare in Washington, that the idea of any health bill empowering a newly established Council to dictate policies to the Board of Public Welfare would not be approved. So, a further revised draft of the health bill was studied and changes made.

This reversal in the formulation of a proposed health bill seemed to indicate that the MAA program, regardless of the wishes of the purveyors of services, would be controlled by the North Carolina Public Welfare Department and the North Carolina General Assembly. Therefore, the CDCA discussed the advisability of submitting a dental program to include all the needed dental services. Thus, the responsible agencies or groups would be informed of the magnitude of the dental needs. The success or failure of the MAA program would then depend upon the General Assembly appropriating the necessary funds, the Department of Public Welfare in administering the program and the dentists of North Carolina in providing the necessary services.

The CDCA decided that for the immediate period the estimates given to Dr. Winston for a limited dental program were reasonable. But the committee was to continue to seek additional sources of information to develop a more complete dental program. In the meantime, the NCDS may choose to participate in the MAA program though limiting the services to extractions only.

**Raleigh, February 22, 1961**

The multi-discipline committee met again to further revise the proposed health bill. The committee also reaffirmed the belief that a Council, composed of representatives of the purveyors of services, must be established to serve as co-ordinator between the purveyors of services and the Department of Public Welfare.

**Durham, February 26, 1961**

The Medical Society voted to rescind their decision of November 28, 1960 to accept vendor medical payments and to continue to participate in the OAA program as before and to offer to participate in the MAA Program on an open-fee arrangement.

**Raleigh, March 7, 1961**

The multi-discipline committee met to approve the final draft of a bill which would provide enabling legislation to permit North Carolina to implement the Kerr-Mills Bill (P.L. 86-778). The bill is to be presented to the 1961 North Carolina General Assembly for their consideration. It contains a provision establishing an Advisory Council made up of representatives of the purveyors of services.

**RECOMMENDATIONS:**

The CDCA recommends:

1. That the North Carolina Dental Society, through action of its Legislative Committee, support the proposed bill submitted to the 1961 North Carolina General Assembly asking for enabling legislation to implement the Kerr-Mills Bill.
2. That the North Carolina Dental Society continue to maintain close liaison with the other members of the multi-discipline committee in implementing any health program in North Carolina.

3. That any health legislation implementing the Kerr-Mills Bill adopted by the North Carolina General Assembly as proposed by the multi-discipline committee be approved.

4. That the Dental Society seek representation on the Board of Public Welfare in the event that legislation fails to provide for the establishment of an Advisory Council representative of purveyors of services under the Kerr-Mills Bill.

5. That the North Carolina Dental Society continue to offer its services to assist any responsible agency of our state in implementation of the new health programs, in the hope of preventing compulsory health legislation.

RILEY E. SPOON, JR. *Chairman*

E. A. PEARSON, JR.

JOHN C. BRAUER

**Action by House of Delegates:** Adopted, May 15, 1961

### DENTAL FORMULARY COMMITTEE

The Dental Formulary Committee has nothing new to report at this time. It might be pointed out, however, that plans are being made to revise the Formulary in 1961. This will be a joint effort of this Committee and a similar committee from the North Carolina Pharmaceutical Association.

### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

DUNCAN M. GETSINGER, *Chairman*

W. T. BURNS

HENRY O. LINEBERGER, JR.

L. M. MASSEY

M. E. NEWTON

ROBERT W. SUGG

**Action by House of Delegates:** Received for information, May 14, 1961.

### COUNCIL ON DENTAL HEALTH AND INFORMATION

The report of the Council on Dental Health and Information is concerned, chiefly, with the availability of dental services for the people of our state; with dental health education as provided by the private practitioners, the public health dentists, and the educational activities of the Oral Hygiene Division of the North Carolina State Board of Health; and with the progress of fluoridation in North Carolina.

According to the 1960 report of the American Dental Association's Bureau of Economic Research and Statistics, there are 1,378 dentists in North Carolina. Eight of our one hundred counties have no dentist, and eleven other counties have only one dentist each. The eight counties without a dentist have a combined population of 57,950, and the eleven counties with one dentist each have a total population of 147,409. With a dentist-population ratio of one dentist to 3,292 persons, North Carolina ranks fifth from the bottom among the southeastern states. With each passing year the dental manpower shortage becomes more acute. Our hope for improving this problem and, thereby, for providing more adequate dental care to the people of our state lies in several areas: namely encouraging and aiding more young men and women to study dentistry; making better use of auxiliary dental personnel; and promoting preventive measures for the control of dental decay.

There are certain groups which, for social or economic reasons, are not served by the private practitioners and for which special provisions must be made. The report of the State Institutions Committee gives information regarding the dental care given to one of these groups — the people confined to the state-supported institutions.

A group of major concern is made up of those who cannot afford the needed dental care. The adults of this group must depend on services provided through the courtesy of the private practitioners, hospital outpatient clinics, and welfare aid. There are more definite provisions for rendering dental care to the underprivileged children. While not adequate, these programs are helping to meet the needs of this group.

Clinician Ralph Phillips of Indiana University  
"meets the press."



Secretary-Treasurer S. Byron Towler casts  
his vote on election night.



A pretty customer tries a new chair in the  
Commercial Exhibit area.



Dental corrections for underprivileged children of elementary school age are made by the public health dentists in the State and local Health Departments.

During the year 1960, there were twenty-five public health dentists in North Carolina. Of these, nine were employed in the Health Departments in our six most populous counties. The remaining ninety-four counties had to depend on the sixteen public health dentists of the Oral Hygiene Division for dental health programs. Needless to say, it was impossible for the Division to furnish service to all of these counties or to all of the eligible children in the counties served. Dental corrections were made for 29,442 underprivileged children. This number represents twenty-nine per cent of the eligible children of elementary school age in the ninety-four counties, leaving seventy-one per cent unaccounted for.

The other program through which these children may be cared for is that of the School Health Coordinating Service. With approximately 18,000 children being treated by the private practitioners under this plan, less than fifty per cent of the medically indigent children are receiving any dental care. This points up the immediate need for more public health dentists and for increased emphasis in the area of dental health education.

Dental health education must be a co-operative endeavor of private practice and public health dentistry. The most teachable moment for an individual is when he is in the dental chair. Patient education is a must for private practitioners and for public health dentists. But, before this is possible, people must be educated and motivated to "go to the dentist."

The importance of regular visits to the dentist receives priority in the educational program of the Division of Oral Hygiene. Indeed, it is to demonstrate this, that the public health dentists conduct their programs in the schools. The corrections for underprivileged children serve as demonstrative teaching, not only for the recipients, but also for their classmates. All of the children in the schools visited receive classroom instruction. In 1960, approximately 100,000 children were taught dental health by the school dentists.

A yearly average of 150,000 children learn about "good teeth" from Little Jack and the dentist in the puppet show. We use the word, learn, advisedly because evaluation of this visual education project shows that the children remember the dental health teachings and are motivated to put them into practice.

Little Jack keeps in touch with the children by means of his "Travelogue." This dental health release goes to 13,000 classrooms each month, which means that 390,000 children are reminded regularly of Little Jack and his four rules for having good teeth. In addition, thousands of children, each year, write to Little Jack and receive reply letters from him.

The Division of Oral Hygiene recognizes that, in the final analysis, the classroom teachers are the ones on whom we must depend to teach dental health throughout the year. To aid them in this task, a major activity of the Division of Oral Hygiene is the production of dental health materials. The materials are distributed only when requested. During this past year, approximately 250,000 pieces of material were sent out in response to their requests to teachers; college students preparing to teach; local health department personnel; and dentists in private practice. We take this opportunity to remind the private practitioners that leaflets and booklets are available to use in their programs of patient education.

Posters were designed and printed especially for National Children's Dental Health Week and were distributed to the elementary schools, to the local health centers, and to the dental offices throughout the State. The Ernest A. Branch Study Club underwrote the cost of mailing the posters to the members of the North Carolina Dental Society. The Oral Hygiene Division welcomed this opportunity of co-operating with the Children's Dental Health Week Committee.

A program which is receiving increasing attention is that of continuous health supervision of all children from birth through eighteen years of age. The State and National organizations of Parents and

Teachers are actively engaged in promoting this project. Our president, Dr. Butler, and the chairman of this Council are serving on the Health Committee of the State Parent-Teacher Association.

The consideration of plans and programs for providing dental care to the aged and chronically ill was assigned to a special committee early last fall.

The radiological health program has progressed during the year. On or about April first the voluntary registration of all dental X-ray machines began. It is hoped that all dentists who have not already done so will mail in the registration of their machines immediately. X-ray machines can now be monitored on a limited basis. Machines will be checked by the radiological team of the State Board of Health upon request.

An objective of the Society is to stimulate communities to adjust the fluoride content of their water supplies to the approved level of 1.0 to 1.5 parts per million. The Division of Oral Hygiene, in co-operation with local dental societies and civic groups, has emphasized, through the many educational procedures at our command, the benefits that can be derived from a fluoridation program. Progress has not been as swift as we had hoped. However, as of January 1, 1961, there were, in North Carolina, thirty-three communities with fluoridated water supplies. The thirty-three cities represent 1,004,396 citizens or fifty-five per cent of the State's urban population. For those children not fortunate enough to receive protection through drinking fluoridated water, the topical application of a fluoride solution to the teeth is recommended. Sodium and stannous fluoride used in such solutions are supplied, free of charge, to the private practitioners by the Division of Oral Hygiene.

At last year's meeting the Society approved a research project entitled, "The Natural History of Dental Diseases in North Carolina." We are glad to report progress in the collection of the data. Completion of this study in three years is contemplated. We believe that it will yield new knowledge of our principal dental health problems and that this knowledge will be valuable in charting future courses in dental practice and in dental health education.

### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

E. A. PEARSON, JR., *Chairman* (1963)

E. S. BENSON, JR. (1961)

HARRY A. KARESH (1962)

L. B. PEELER (1964)

WILLIAM D. YELTON (1965)

Action by House of Delegates: Received for information, May 14, 1961.

## COUNCIL ON DENTAL HEALTH AND INFORMATION

### Supplemental Report No. 1

Based on an analysis of data collected in a survey of dentistry in the United States, under the auspices of the A.D.A.; certain recommendations were made to improve the dental health of our nation. The Council on Dental Health and Information of the North Carolina Dental Society believes that recommendations from our committee should be made and that formal action be taken by the North Carolina Dental Society to support them.

### RECOMMENDATIONS:

The Council on Dental Health and Information proposes the following recommendations:

1. That the North Carolina Dental Society make a renewed effort to promote water fluoridation and community topical fluoride programs, and urge all public agencies, voluntary associations and professional societies to aid and support this program.

2. That the North Carolina Dental Society at their 1961 Annual Session unanimously support enactment of Senate Bill 917 and H.R. 4742. This bill will provide for the establishment of Federal categorical grants-in-aid to support dental public health programs at state and local levels. These

grants-in-aid would permit states to expand their present dental health programs in all aspects — dental health education, preventive programs, topical fluoride programs and dental care programs for the indigent and underprivileged. Other health programs such as heart, cancer, crippled children, polio and many others have enjoyed Federal categorical grants-in-aid to support these programs. Dentistry has never had such favor. Your Council urges the North Carolina Dental Society to adopt this recommendations and to notify the appropriate committees of Congress and the American Dental Association of this action.

3. That the North Carolina Dental Society, through an appropriate committee — special or standing, make a comprehensive study of the potential advantages and/or disadvantages of a dental service corporation in North Carolina to include the problems of activating such a corporation, methods and procedure of selecting patients; cost of administration, number and types of personnel involved in such an administration, who could participate in such a program, and report their findings to the Executive Committee at the earliest possible date.

4. That the North Carolina Dental Society authorize and urge a member of the Committee of the Council on Dental Health and Information (a private practitioner) to attend the National Dental Health Conference, sponsored by the American Dental Association Council on Dental Health and that the expenses of this person while attending the conference be paid by the North Carolina Dental Society.

It seems only feasible for a private practitioner to attend since much of the conference discussion relates to the private practitioner and the dental profession.

E. A. PEARSON, JR. (1963) *Chairman*

E. S. BENSON, JR. (1961)

L. B. PEELER (1964)

HARRY A. KARESH (1962)

WILLIAM D. YELTON (1965)

#### **Action by House of Delegates:**

Recommendations 1, 2 and 3, adopted, May 16, 1961.

Recommendation 4, amended by deleting the words "and that the expenses of this person while attending the conference be paid by the North Carolina Dental Society" and adopted as amended, May 16, 1961.

### **ADVISORY COMMITTEE TO THE DENTAL LABORATORY TECHNICIANS TRAINING PROGRAM**

**Objective of Committee.** This special committee, composed of the undersigned members, is committed to meet with the Director of the Durham Industrial Education Center and his staff when called upon to advise in the activation, development, and operation of the training program for dental laboratory technicians.

**Activities of the Committee.** The committee has met with Mr. Lew Hannen, City Superintendent of the Durham City Schools, and Mr. H. K. Collins, Director of the Durham Industrial Education Center on several occasions during the past year to:

1. Provide a recommended two-year curriculum for the training of dental laboratory technicians, consistent with the standards of the American Dental Association and its Council on Dental Education, as well as the American Dental Laboratory Association and its Certification Board, and

2. Provide technical assistance in architectural design of the teaching laboratories, equipment and supplies necessary for the activation and operation of the program, and

3. Provide recommended job specifications for laboratory technicians to be employed by the Industrial Education Center for full-time teaching.

**Status of Proposed Training Program.** The new building for the Durham Industrial Education Center is nearing completion, and included in this structure is a sizeable area to be utilized specifically for the training of dental laboratory technicians. Considerable Federal and State financial support is to be realized through the State Department of Public Instruction (Trade and Industrial Division) for equipment and routine operations on an annual basis.

The Durham Board of Education in a meeting Monday, April 10, 1961 voted (3-2) to withdraw from any further interest in this training program, with the statement that this item of expense was too great for the Durham taxpayers — when the demand for dental laboratory technicians in the Durham area was so small. However, the State Department of Public Instruction representatives indicate that the Durham Center will be featured in this training program for dental laboratory technicians, and that the other centers throughout the State of North Carolina will be featured in other technical fields. It is on this latter basis and operational concept that a reconsideration of this question (activation of the training program for dental laboratory technicians) will be realized at the May 8 meeting of the Durham City Board of Education. Accordingly there is reason to believe that the Durham Board of Education will approve the activation of this important program at the May meeting. This program was scheduled for its first class in the fall of 1961.

### RECOMMENDATIONS:

Since the North Carolina Dental Society already has the Prosthetic Dental Service Committee, which is a standing committee, and which has a continuing interest in all affairs relating to prosthetics, it is recommended:

1. That this special committee be deactivated.
2. That the duties and responsibilities of this committee be assigned to the Prosthetic Dental Service Committee.

JOHN C. BRAUER, *Chairman*

S. L. BOBBITT

DAVID P. DOBSON

NORMAN F. ROSS

**Action by House of Delegates:** Adopted, May 15, 1961.

### SPECIAL COMMITTEE ON DUES

The Special Committee on Dues held a meeting at the Central Office, Raleigh, North Carolina, April 30, 1961, to study the present and future financial status of the North Carolina Dental Society. All members of the committee were present except Dr. Edgar Sikes, Jr., who was attending a meeting of the Southern Society of Oral Surgeons in Florida. In addition, Dr. Luther Butler, Dr. Norman Ross and Mr. A. M. Cunningham sat in on the discussions.

This committee was created back in February by President Butler and was charged, as previously pointed out, with the responsibility of making a study of the present and possible future financial status of the North Carolina Dental Society.

It was brought out at the beginning of the discussion that the Society will incur deficits this year and utilize its capital funds to defray a portion of the operating expenses. As you know, the Society has been involved in litigation and any money spent for this purpose, over and above the retaining fee, must come from unappropriated surplus funds. It must be obvious to all the membership that it would not be a desirable practice to interrupt the building of the reserve fund to an adequate level by using this reserve for the day-to-day operations of the Society. As the Society grows in prestige and stature, it can become the target of litigation against which, as we have experienced, it is costly to defend.

It was brought to our attention by Mr. Cunningham, that the trend toward eliminating an annual surplus has become more marked in the past two or three years for two reasons: (1) The rising costs and expanding activities — the normal cost of doing business — salaries, social security taxes, city and county taxes, printing, supplies, insurance, services on all office equipment, utilities, telephone, rent, travel, etc.; (2) The Society's income from other sources than membership dues seems to have reached a plateau. In other words, we are now renting all of the available exhibit space and charging all the traffic will bear. Income from the JOURNAL is limited by the present space for advertising and the current rates charged. No increase in advertising rates is contemplated. In the past, only good business management has enabled the

Society to expand its activities by obtaining income from other sources than membership dues. However, many worthwhile activities have been presented for consideration but not all could be initiated or developed within the limits of existing funds.

On September 16, 1956, the Executive Committee created a Development Fund for the purpose of "financing the purchase of property and the erection of a building to house the Central Office at some future date." You will recall that as an initial gift to this project the Past Veterans' Association donated \$743.30. In the original motion establishing the fund it was provided that 5 per cent of income from dues would be transferred from the General Fund to the Development Fund each fiscal year, "if possible and feasible and subject to the approval of the Executive Committee." As a result of this provision, \$3,686.15 was saved for this purpose. This practice was discontinued last year because of an unexpected emergency. We simply could not divert 5 per cent of the General Fund to the Development Fund.

In summary, membership dues in the North Carolina Dental Society have remained the same since 1956. It now appears as though non-dues income has reached a plateau and that further support for activities, rising costs and inflation, salary increments, must come from increased membership dues.

### RECOMMENDATIONS:

On the basis of the foregoing, the Special Committee on Dues recommends that the dues be increased from \$25.00 to \$35.00 beginning in 1962. The committee believes that such an increase will enable the Society to carry out its responsibilities in a reasonable way for a period of five years. This increase will not permit substantial expenditures for a large number of new projects, but it will permit the Society to continue its moderate, steady growth.

S. EVERETT MOSER, *Chairman*

W. B. SHERROD

S. B. TOWLER

T. E. SIKES, JR.

H. K. THOMPSON

**Action by House of Delegates:** Adopted, May 15, 1961.

### APPENDIX to SPECIAL COMMITTEE ON DUES

#### EXPENSES

	Schedule A		Schedule B	
Administrative				
Salaries & SS.....	\$13,225.00		\$18,225.00	
Rent & Utilities.....	1,650.00		3,000.00	
Office Supplies .....	875.00		900.00	
Travel .....	1,500.00		1,500.00	
Telephone .....	675.00		700.00	
Postage .....	675.00		700.00	
Insurance .....	325.00		325.00	
Clipping Service .....	125.00		130.00	
Repairs & Maintenance	300.00		300.00	
Miscellaneous .....	50.00	\$19,400.00	100.00	\$25,880.00
Publications				
Journal .....	\$ 4,000.00		\$ 4,500.00	
Newsletter .....	300.00		800.00	
Transactions .....	1,700.00	6,000.00	1,700.00	7,000.00
Annual Session .....		7,000.00		8,000.00
Committees .....		0.00		1,000.00
District Officers'				
Conference .....		125.00		125.00
Legal Counsel .....		500.00		800.00
Office Equipment .....		800.00		800.00
*Other .....		500.00		500.00
		<u>\$34,325.00</u>		<u>\$44,105.00</u>



The A Schedule indicates what the normal expenses might be during the next fiscal year (1961-62) at the present dues rate of \$25.00 per member, based on corresponding expenses in the present fiscal year (1960-61).

The B Schedule indicates how additional revenue secured through a dues increase of \$10.00 a year could be wisely appropriated.

#### *Estimated Income*

Income is derived from three sources: Dues, the JOURNAL and Commercial Exhibits.

Income from the JOURNAL is limited by the present space for advertising and the current rates charged. No increase in advertising rates is contemplated.

Income from commercial exhibitors at the annual session is also limited. All available space is now being used and no increase in the rate is anticipated.

Therefore, for the purpose of this study, income from these two sources are identical in both schedules.

At the present time the North Carolina Dental Society has 1,168 members. Life members and members in the military service pay no state dues. For the purpose of this study, income from dues is based on 978 dues paying members.

#### *Estimated Income*

	<b>Schedule A</b>	<b>Schedule B</b>
Dues .....	\$24,450.00	\$34,230.00
Annual Session....	6,375.00	6,375.00
Journal .....	3,500.00	3,500.00
	<b>\$34,325.00</b>	<b>\$44,105.00</b>

The increase of dues from \$25.00 to \$35.00 annually would bring in an additional \$9,780.00. The allocation of this additional revenue is explained and substantiated item by item.

### **Administrative Expenses**

#### *Salaries and Social Security*

"A" Schedule figures reflect an increase of \$500.00 over 1960-61 to take care of nominal increases in salary and provide for minimum extra clerical help to carry on the increasing work load in the Central Office.

"B" Schedule adds \$5,000.00 to the "A" Schedule figure to provide for proportionate increases in salaries of current employees, extra clerical help and the employment of one additional full-time employee.

#### *Rent and Utilities*

"A" Schedule reflects the cost of these items in the present location of the Central Office which contains approximately 800 square feet at an annual cost of about \$2.00 per square foot.

"B" Schedule reflects an additional allocation of \$1,350.00. The present quarters of the Central Office were secured on a temporary basis in 1955 when the office was opened. It has served its purpose well and has been economical office space.

However, there are several factors indicating a change of location should be considered:

1. The location is not in the most desirable part of Raleigh.
2. Although 800 square feet is adequate, the arrangement is not designed to make the most advantageous use of this space. A substantial investment would have to be made to take full advantage of what otherwise would be adequate space and would be unwise. In the first place, the landlord is not inclined to give lease on the space and second, the location is not desirable.
3. The office is cramped now and if even an additional employee were secured there would not be suitable space to take care of the situation.
4. More and more, the Central Office is being used for committee meetings and the arrangement is ill-suited to this purpose nor is there sufficient space. A conference room is needed.
5. Adequate parking space is becoming a problem because of changes made in the surrounding area.

The current rate of office space in Raleigh which would better serve the Society from every angle — location, arrangement of office space, adequate parking, etc. — is \$3.50 per square foot. For 800 sq. ft. this would cost \$3,000.00 a year.

#### *Office Supplies*

Very little difference in the appropriation needed here.

#### *Travel*

The Executive Secretary would be of more value, if he were given the opportunity to get about the state more to local meetings. As the workload now stands, he is confined more and more to the office. Also, there are regional and national conferences which he at least should attend so that the Society could be represented. One more employee would relieve him of detailed work at the office and the additional \$300.00 in the "B" Schedule would provide a reasonable amount of the necessary funds for this purpose.

#### *Other Administrative Expenses*

There is very little difference in the funds allocated in the "A" and "B" Schedules to telephone, postage, insurance, clipping service, repairs and maintenance and miscellaneous.

### **Publications**

#### *Journal*

An additional \$500.00 is allocated under the "B" Schedule. No Society should expect its JOURNAL to be self-sustaining. Some societies allocate a certain amount of dues per member for the support of its JOURNAL.

There is a limit to the amount of advertising a professional publication should carry as well as the rates charged for advertising. The latter is dependent a good deal on circulation. On these factors alone, the JOURNAL has reached its peak as far as advertising is concerned.

Since advertising is the main source of revenue, the cost of publication must be supplemented by the Society.

More important, an increased appropriation would enable the Editor-Publisher to improve the JOURNAL and make it a more useful service to the Society.

#### *Newsletter*

This is a very popular means of communication and should be published at least once a month. The JOURNAL is published quarterly, and one of the issues (August) contains only the Transactions. Under this arrangement, the publishing of current news is almost impossible. Here is where the Newsletter fills in. Unless a JOURNAL is published once a month a Newsletter is a necessity to keep the membership informed.

The Newsletter is now published and mailed eight times a year (the months when the JOURNAL is not published.)

An increase of \$500.00 to increase the number of Newsletters from 8 to 12 per year is reflected in the "B" Schedule.

#### *Transactions*

No difference in "A" and "B" Schedules necessary for this item.

### **Annual Session**

An additional \$1,000.00 has been allocated to the Annual Session in the "B" Schedule. Here the Society is limited in revenue from exhibits by the space in the hotel available. Every inch of available space is now being used for this purpose and an increase in revenue from this source would require an increase in the charge to the exhibitors. Experience indicates that we are now charging all the traffic will bear.

Therefore, if more ambitious plans are to be undertaken and features added to constantly improve this annual event, more money will be needed.

### **District Officers' Conference**

No difference in appropriation under "A" and "B" Schedules.



Scenes from the reception on the front lawn of The Carolina, Pinehurst, 105th Annual Session.

### Legal Counsel

The Society now retains legal counsel at \$500.00 per year. Services performed by legal counsel are charged against this retaining fee. If charges are more than \$500.00 the retaining fee is credited in payment thereof.

The Society has been fortunate through the years in not being burdened with legal fees. However, in this day and time a professional society can ill afford not to retain legal counsel. An additional \$300.00 over and above the retaining fee of \$500.00 has been appropriated in the "B" Schedule. This is a reasonable estimate of what legal counsel will cost in normal times.

At present we are not experiencing normal times. The Society is involved in litigation and any money spent for this purpose, over and above the retaining fee must come from unappropriated surplus funds.

### Office Equipment

No difference in the appropriation for office equipment under the "A" and "B" Schedules.

One reason, the Central Office has performed so well with a limited staff, is that adequate equipment has been provided — typewriters, duplicating machine, copying machine, addressograph, etc.

This equipment must be replaced periodically on a regular schedule. This is the most economical procedure, otherwise, all equipment might need replacement at one time. It is far better to provide for some replacement each year.

### Other

No difference in the "A" and "B" Schedules under this item which includes contributions to the Dental Foundation, bank charges, the annual audit, memberships, and county and city taxes on business equipment and furniture, as well as numerous other small items.

## ENTERTAINMENT COMMITTEE

The committee has arranged the following program:

Tuesday, May 16—

- 5:30 Reception Honoring North Carolina Society officers and guests—  
Cost of refreshments — \$100.00 to \$125.00.
- 7:00 Annual Banquet  
Cost for place cards, favors, flowers, etc.
- 8:30 Entertainment-Ballroom  
N. C. Dental School Choral Group  
Dr. & Mrs. Roger Sturdevant  
Cost \$75.00 to \$90.00  
Mr. Walter E. Vassar—Musical troubadour
- 10:00 Dance—Ballroom — "The Duke Ambassadors"  
cost \$310.00 to \$350.00

## RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

T. G. COLLINS

E. D. BAKER, *Chairman*

HENRY O. LINEBERGER, JR.

D. W. SEIFERT, JR.

Action by House of Delegates: Received for information, May 14, 1961.

## ETHICS COMMITTEE

The House of Delegates of the North Carolina Dental Society, on May 2, 1960, deleted the third paragraph in Section thirteen and changed the fourth paragraph of Section fourteen of the Code of Ethics of the North Carolina Dental Society. This change has been made and the membership notified.

The members of the Ethics Committee of the North Carolina Dental Society, who serve as chairmen of their respective District Ethics Committees, have had questions of ethics come before them within their districts through the year. These cases have been carried to a satisfactory completion, preventing the necessity of action by the Ethics Committee of the North Carolina Dental Society. This is according to the first paragraph of Section twenty-one of the Code of Ethics of the North Carolina Dental Society.

## RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

G. L. HOOPER, (1962) *Chairman*

H. E. BUTLER (1963)

A. C. CURRENT, JR. (1964)

C. E. MINGES (1961)

T. G. NISBET (1965)

Action by House of Delegates: Received for information, May 14, 1961.

**EXHIBIT COMMITTEE****April 1, 1961**

**1. Potential Revenue**—The floor plan for commercial exhibit space at the 105th Annual Session and the fee assessed the exhibitors has not been changed from 1960.

We have 75 booths available for rent at \$85.00 each. This means our potential revenue is \$6,375.00.

The contract for decorating has been signed with Shepard Decorating Company, and their fee will be \$8.00 per booth. This is \$1.00 less per booth than in previous years.

**2. Sale of Exhibit Space**—Over 200 prospective exhibitors have been contacted and by March 31 we had contracts from 60 exhibitors with all 75 booths sold for a total revenue of \$6,375.00. This is the first year that all exhibit area has been sold.

**3. Admission of Exhibitors**—The policy of admission of exhibitors has not been changed since 1960. It is interesting and encouraging to note that many of the concerns exhibiting in 1960 are returning in 1961. This is an indication that we did a good job on public relations with these exhibitors at the 1960 meeting. We hope that the members will continue to make a conscientious effort to let the commercial exhibitors know we appreciate their presence at our meetings.

Last year the custom of having a social hour for the commercial exhibitors on Monday afternoon was continued. We believe that this was another factor in bringing so many of them back this year. We shall again have a social hour on Monday for the exhibitors.

**4. Door Prizes**—As a means of encouraging attendance on the last day of the annual session, it has been customary to award door prizes just before adjournment on Wednesday. This apparently has brought the desired results.

**5. Appropriations** — The Executive Committee has appropriated \$1,625.00 for the Exhibit Committee expenses for 1961.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

W. PENN MARSHALL, *Chairman*

CHARLES T. BARKER

D. F. HORD, JR.

J. W. MENIUS

DAVID C. YOUNG

**Action by House of Delegates:** Received for information, May 14, 1961.

**GOLF COMMITTEE**

The annual golf tournament will be held at the Pinehurst Country Club, Sunday, May 14. Tee-off time will be between 8:00 a.m. and 1:00 p.m. The tournament will be conducted on the Calloway System and it will be played on courses No. 1, 2, or 3. Prizes will be given to high net, low net, high gross, low gross and low putts. Entrance fee will be 75 cents.

An appropriation of \$40.00 has been approved to cover the expense of the tournament and the awards.

The annual Golf Dinner will be held Sunday, May 14 at 7:00 p.m. in the Crystal Room of The Carolina. The participants in the Skeet Shoot will join the golfers for this occasion. Awards in both events will be made at this time.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

R. BRUCE WARLICK, *Chairman*

C. Z. CANDLER, JR.

ARTHUR GOLLOBIN

C. R. VANDERVOORT

MARVIN E. WALKER

**Action by House of Delegates:** Received for information, May 14, 1961.

### HOSPITAL DENTAL SERVICE COMMITTEE

The only activity of this Committee was to inspect the Dental Service at the 4th Tactical Hospital, Seymour Johnson Air Force Base. This service was approved and the report sent to the Council on Hospital Dental Service, American Dental Association.

Dr. Matthew G. Delbridge, 206 W. Ash St., Goldsboro, N. C., made this inspection.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

P. B. WHITTINGTON, JR., *Chairman*

F. D. BELL

Z. L. EDWARDS, JR.

S. E. MOSER

T. G. NISBET

**Action by House of Delegates:** Received for information, May 14, 1961.

### HOSPITALITY COMMITTEE

At the annual meeting of the Convention Committee in Pinehurst in January an appropriation was made to secure Parlor 322 for the use of the Hospitality Committee in entertaining the essayists, out-of-state visitors and guests.

At the time of the presentation of this report, the Committee will have written to all essayists and guests who are to appear on our program extending to them a most cordial welcome to our state and to the 105th Annual Meeting of the North Carolina Dental Society. In addition, these guests will have received in their room boxes invitation cards to the Hospitality Parlor.

The Hospitality Room will be open Sunday from 5 p.m. to 6:30 p.m.; on Monday from 11:45 a.m. to 12:45 p.m. and 5 p.m. to 6:30 p.m.; on Tuesday from 11:45 a.m. to 12:45 p.m.

The committee members and their wives will try to continue and to complement the excellent record of this committee in past years.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

C. W. POINDEXTER, *Chairman*

J. C. BRAUER

H. E. BUTLER

R. D. COFFEY

S. B. TOWLER

ZYBA K. MASSEY

**Action by House of Delegates:** Received for information, May 14, 1961.

### HOUSING COMMITTEE

Hotel accommodations were assigned on the same basis as in previous years. Applications for reservations permitted members to indicate their choice of hotels in Pinehurst.

The rates of The Carolina remained the same as last year — \$16.00 per day for single rooms and \$28.00 per day for double rooms.

Hotel applications were mailed to the membership from Raleigh on Saturday, February 11.

In accordance with the policy established some years ago, hotel accommodations in The Carolina were limited to dentists, central office staff members and those assisting the staff in the operation of the convention.

Special preference for accommodations at the Headquarters hotel were provided for past presidents, key committee chairmen, the president of the Auxiliary and special guests.

The Carolina informed the committee that a full house was not maintained during the annual meeting last year, and the number registered in the hotel on the final night of the convention was particularly low. The committee felt obligated to assist the management in improving this situation for 1961, since the hotel limits its accommodations according to our wishes. We hope the situation will show improvement this year.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

R. S. HUNTER, *Chairman*

W. C. CURRENT

D. F. HORD, JR.

WILLIAM H. JOHNSON

W. W. UMPHLETT

**Action by House of Delegates:** Received for information, May 14, 1961.

**INDUSTRIAL COMMISSION COMMITTEE**

Since the dental fee scales have been revised and approved by the North Carolina Dental Society, we have not had any request for changes or business transactions with the commission. Consequently, there has not been any necessity for calling a meeting of this committee this year.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

L. D. HERRING, *Chairman*

M. RAY HUNTER

M. M. LILLEY

W. L. WOODY

W. D. YELTON

**Action by House of Delegates:** Received for information, May 14, 1961.

**INSURANCE COMMITTEE**

The Insurance Committee wishes to report that we are constantly striving to get the members broader coverage at a better rate than the coverage that we already have.

We are now in contact with a representative of an insurance firm that is working on a group policy to extend the age limit to 74 or 75 years. We hope to have something definite to report on this at a later date.

We have recently approved, and the Executive Committee approved at their meeting in Raleigh, January 28, an addition to your major hospital and surgical policy. This is Twenty-four Hour Accidental Death and Dismemberment Coverage that will carry no examination. The insurance company that is carrying your present Major Medical Expense policy will contact each member at a later date.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

E. L. EATMAN, (1962) *Chairman*

T. L. BLAIR (1964)

J. R. EDWARDS (1963)

CHARLES D. GERDES (1965)

J. D. SOUTHWORTH (1961)

**Action by House of Delegates:** Received for information, May 14, 1961.

**LEGISLATIVE COMMITTEE**

By direction of the House of Delegates the Legislative Committee devoted its efforts in vigorous support of a five-point legislative program during the 1961 session of the North Carolina General Assembly which included:

1. Amendments to the General Statutes which would provide for the election of the North Carolina State Board of Dental Examiners by all dentists licensed to practice and residing in North Carolina.

2. Amendments to the General Statutes recommended by the North Carolina State Board of Dental Examiners including: (a) a mandatory prescription law governing all work performed by dental laboratories for dentists; (b) elimination of the requirement that notice of annual and special meetings of the Board be published in the newspapers; (c) an increase in fee for annual renewal of license from \$5.00 to \$8.00; (d) an increase in fee for duplicating a license from \$2.00 to \$5.00; (e) change final date for renewal of license from June 30 to March 31.

3. Enabling legislation to permit the establishment of a dental service corporation in North Carolina.

4. In co-operation with the Medical Society, the Pharmaceutical Association, and the Hospital Association to seek enabling legislation to permit North Carolina to participate in the provisions of the Kerr-Mills Bill and establish a Medical Care for the Aged program in North Carolina.

5. Oppose any and every effort of the North Carolina Dental Laboratory Association to introduce licensure legislation in the General Assembly.

To attain these legislative objectives your committee organized 176 liaison dentists from Manteo to Murphy who co-operated in informing their legislators on legislative matters pertaining to dentistry. The Society is indebted to these men for the magnificent job they have done and are still doing in behalf of legislation in which we are interested.

At the request of the ADA Council on Legislation, liaison dentists were also secured for contacting individual members of the North Carolina Congressional delegation in Washington in behalf of national legislation affecting dentistry. It is anticipated that during the next few weeks these liaison dentists will be contacting their assigned legislators in behalf of the Keogh-Utt Bill (Self-Employed Individuals' Retirement Act) and opposing efforts by the present administration to pass health insurance legislation of the Forand type.

On April 12 the committee attained its first legislative objective. The North Carolina General Assembly enacted into law SB 45 which provides for the election of Dental Board members by all licensed dentists in the state. The bill was introduced in the N. C. Senate by our own dentist-legislator, Dr. Dennis S. Cook of Lenoir. Representative Frank M. Wooten, Jr., of Greenville, introduced the bill in the House. We are grateful to Dr. Cook and Mr. Wooten for the fine services they rendered us in this respect.

Colonel W. T. Joyner and Mr. R. C. Howison, Jr., legal counsel for the Society, were responsible for the drafting of this legislation. We were exceedingly fortunate to have their expert counsel and guidance in steering this legislation through both legislative houses in Raleigh.

The progress to date (April 27) of the other four legislative objectives is as follows:

1. Amendments to the dental practice laws recommended by the Board of Examiners was introduced (SB 228) in the Senate by Senator Cook April 24. On April 27 it was reported out favorably by the Public Health Committee. It must now be given second and third reading by the Senate and, if passed, sent to the House for action.

*EDITOR'S NOTE: SB 228 was subsequently passed by the Senate May 11, 1961 and became law effective July 1, 1961.*

2. Enabling legislation to permit North Carolina to establish a MAA program under the Kerr-Mills Bill was introduced in the House (HB 384) April 5 by Representative Davis of Kinston. The House Health Committee held a hearing on the bill April 26. At the time of this report the committee had not reported on the bill.

*EDITOR'S NOTE: HB 384 was killed by the Senate June 21, 1961.*

3. Enabling legislation to permit establishment of dental service corporations is currently being drafted by legal counsel and should be ready for introduction in the legislature shortly.

*EDITOR'S NOTE: SB 402 to permit establishment of dental service corporations became law June 21, 1961.*

4. To date the bill which would license dental laboratories has not been introduced in either house. If and when it is, the committee will move quickly and as effectively as we can to defeat it.

*EDITOR'S NOTE: HB 699 to license dental laboratories was introduced and defeated.*

A supplemental report will be presented to the House of Delegates, if need be, to bring the members up-to-date on progress made beyond that contained in this report. We are hopeful and confident that by the time the General Assembly adjourns, your Legislative Committee can report that all five legislative objectives have been attained.



**RECOMMENDATIONS:**

The Legislative Committee recommends:

1. That the Society continue to take an active interest in state and national legislation.
2. That efforts be made to encourage at least one dentist to serve in the state legislature each session.
3. That the Society continue to employ good legal counsel of the caliber we have had this year.
4. That the Society can, through its Legislative Committee, continue to have an active liaison dentist organization whenever our General Assembly is in session.

H. ROYSTER CHAMBLEE, (1965) *Chairman*

E. U. AUSTIN (1963)

PAUL E. JONES (1961)

W. T. McFALL (1962)

S. W. SHAFFER (1964)

**Action by House of Delegates:** Adopted, May 15, 1961.

**LEGISLATIVE COMMITTEE****Supplemental Report No. 1**

The Legislative Committee recommends that the following resolutions be adopted:

1. *Resolved*, that the Legislative Committee and Counsel be instructed to oppose any bill now or hereafter pending before the 1961 Session of the North Carolina General Assembly which proposes to make membership in the North Carolina Dental Society a condition of eligibility to any public office; or which proposes to make election, selection, or recommendation by the North Carolina Dental Society a prerequisite to the selection or naming of any person to public office; and be it further

*Resolved*, that the North Carolina Dental Society shall not, at any time, elect, select, or recommend any person to or for public office when any such action by such Society is, by any law, made a prerequisite or condition of the selection or naming of such person to public office.

2. *Resolved*, that resolution 102 pertaining to the Dental Service Corporation passed by the House of Delegates at Pinehurst, December 11, 1960, and referred to the Legislative Committee, be deferred until the passage or defeat of House Bill 699 finally be determined.

H. ROYSTER CHAMBLEE, *Chairman*

**Action by House of Delegates:** Both resolutions adopted May 15, 1961.

**LIBRARY AND HISTORY COMMITTEE**

Your Committee during the year has been compiling data and accumulating material for the purpose of bringing the History of the North Carolina Dental Society up to the present date. It takes time and much effort to assemble the materials that will be needed to complete the History. This work requires much reading of past Proceedings and Journals. This assignment is one in which it is very difficult to distribute the actual writing of the history to individual members of a large committee. The greater part of the work falls on one person.

It was noted that in the case of a neighboring state where their state history was released a few years ago, a professional historian was employed and he required ten years to complete the job.

The work of recording the history of this great organization for posterity is an important one, but we should be sure that interest of the members in this history will be sufficient to support our organization in financing this project.

Let me urge all members who have Proceedings and Journals dating from 1930 to 1945 donate them to the History Committee to aid them in their work.

Our work so far has not required any expenditures but as the work progresses funds will be needed.

We recommend that materials and data be assembled as fast as possible by your committee in accordance with the time and effort that they will have to devote to this work.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

NEAL SHEFFIELD, (1963) *Chairman*

FRANK O. ALFORD (1964)

H. ROYSTER CHAMBLEE (1962)

R. FRED HUNT (1961)

S. H. STEELMAN (1965)

**Action by House of Delegates:** Received for information, May 14, 1961.

**MEDICARE COMMITTEE**

The chairman of this committee was Dr. A. T. Jennette until his death, when President Butler requested Dr. Lineberger to act as chairman.

The following is a chronological order of the activities of the committee for the year 1960-1961:

June 29, 1960 — The committee approved the request by the Chief Dental Officer at Camp LeJeune Marine Base, Jacksonville, North Carolina, to designate the Marine Base as a remote area for the purpose of dental care for dependents of duty personnel.

October 19, 1960—Received a letter from District Dental Officer, Headquarters Fifth Naval District, Norfolk, Virginia, requesting that U. S. Naval Facility, Cape Hatteras, Buxton, North Carolina, be declared a remote area for the purpose of authorizing limited dental care for the dependents of active duty personnel stationed there.

October 28, 1960—Dr. Henry Lineberger, Jr., requested to take over chairmanship after untimely death of Dr. A. T. Jennette.

November 21, 1960—The committee approved request of District Dental Officer, Fifth Naval District Headquarters, to designate U. S. Naval Facility, Cape Hatteras, Buxton, N. C., a remote area for the purpose of limited dental care for the dependents of the active duty personnel stationed there.

June 29, 1961—Received letter from Major General R. B. Luckey, Commandant, Marine Corps Base, Camp LeJeune, North Carolina, stating that the Naval Bureau of Personnel did not fully understand the committee's approval of June 29, 1960. In particular, the Naval Bureau did not understand the provisions of approval.

February 8, 1961—The chairman of the committee and the Executive Secretary of the N. C. Dental Society met with seven doctors in Jacksonville to discuss the reinvestigation of the Camp LeJeune situation.

March 1, 1961—The Chairman of the committee, the Executive Secretary and two doctors from Jacksonville met with Col. Bishop and Capt. Pridgen of the Marine Corps Base, Camp LeJeune, to further discuss the possibility of not approving the request to declare the area remote.

At present, discussions are still underway on the problem of Camp LeJeune.

All correspondence to and from this committee and all minutes of all meetings of this committee are on file in the office of the North Carolina Dental Society, Raleigh, North Carolina.

**RECOMMENDATIONS:**

1. That as members of this committee the President of the North Carolina Dental Society appoint members of the Society from areas possibly affected by the Medicare Act of 1957. However, the majority and the chairman should be from non-affected areas.

2. That the Legislative Committee try to get the word "remote" changed in the Medicare Act to a more acceptable term.

HENRY O. LINEBERGER, JR., *Chairman*

HOWARD L. ALLEN

G. W. YOKEYLEY

**Action by House of Delegates:**

Recommendation No. 1 adopted, May 15, 1961.

Recommendation No. 2 deleted, May 15, 1961.

**MEMBERSHIP COMMITTEE****1. Membership as of December 31, 1960**

On December 31, 1960, we had a total of 1,136 members. Here is a comparison of membership by classification for the years 1959 and 1960.

	<b>Dec. 31, 1960</b>	<b>Dec. 31, 1959</b>
Active .....	963	909
Military .....	17	15
State Life .....	89	104
ADA Life .....	67	59
	<b>1,136</b>	<b>1,087</b>

This is a net gain of 49 members compared with a year ago, and a gain of 54 dues-paying (active) members.

**2. Members as of May 1, 1961**

Active .....	988
Military .....	22
State Life .....	41
ADA Life .....	121
	<b>1,172</b>

Ten members (active) are delinquent in their dues as of May 1, 1961. A year ago there were 21 delinquent members.

The net gain in total membership for 1961 is 36 members.

At the ADA meeting in Los Angeles last fall, 55 of our members were elected to ADA Life membership. However, 46 of them were already State Life members, so this did not disturb appreciably the ratio of paying to non-paying members in 1961.

For the past five years we have shown a steady rise in total membership — from 1,010 in 1956 to 1,172 in 1961.

There were 46 new members accepted by the Districts last fall. The year previous there was a total of 63 new members.

**3. Dropped from the Roll:**

Two members had not paid their dues by December 31, 1960, and an appropriate recommendation concerning them is made at the close of this report. As of December 31, 1959, six members had not paid dues.

**RECOMMENDATIONS:**

That it be made a matter of record that the following members did not pay their 1960 dues by December 31, 1960, and have been dropped from the roll as required by Article V, Section 6 of the Bylaws:

Dr. C. D. Dawkins, Rockingham (Third District)  
Dr. Reid T. Garrett, Rockingham (Third District)

NORMAN F. ROSS, *Chairman*

R. B. BARDEN

J. E. GRAHAM, JR.

A. T. LOCKWOOD

C. P. OSBORNE, JR.

C. W. POINDEXTER

**Action by House of Delegates: Adopted, May 15, 1961.**

**MILITARY AFFAIRS AND CIVIL DEFENSE COMMITTEE**

The Military Affairs and Civil Defense Committee has had no requests or complaints during this year.

This committee had no formal meeting but the chairman prepared and submitted a suggested report to each member of the committee.

**RECOMMENDATIONS:**

With world-wide tensions heightening today, we advocate that every constituent society urge every dentist in the state to co-operate fully in carrying out the programs evolved by the Council on Federal Dental Services pertaining to civil defense as follows:

1. By participating in any emergency disaster training programs available to him so that he may be able to perform with maximum efficiency in case of major war disaster (nuclear or otherwise).



The dentists enjoyed the apples at the Division of Oral Hygiene exhibit.



Dr. R. B. Harrell and Dr. S. H. Steelman



Speaker R. D. Coffey and Colonel W. T. Joyner, legal counsel

(The Board of Trustees of AMA has significantly recognized this need for dentists to be trained to participate as members of the emergency health team. Copies of *Emergency War Surgery*, Nato handbook, are available in limited numbers.)

2. By carrying out family shelter programs to support the government effort to promote the construction and thus contribute to the security of our nation by reasonably insuring the ability of himself and his family to survive nuclear attack.

R. E. KILPATRICK, *Chairman*

A. C. CURRENT, JR.

C. D. JOHNSTON, JR.

J. DONALD KISER

R. M. OLIVE, JR.

**Action by House of Delegates:** Adopted, May 15, 1961.

### MONITOR COMMITTEE

The Chairman of the Monitor Committee met with the Executive and Convention Committees in Pinehurst, January 8, 1961. At this time a tentative committee report was presented and was received and approved by the Executive Committee of the North Carolina Dental Society.

We will have four members of the committee on duty at all sessions to maintain and assist in making this meeting of the state society a successful one.

All sessions will be announced over the amplifying system in the hotel lobby at least five minutes before the hour and on the hour of the meeting. Signs indicating what program is in session will be properly displayed at the door of each meeting and a poster with the words "Quiet Please—Convention In Session," will be placed in the hallway. We will use the lighted blackboard, to be placed at the left front of stage, for paging at all scientific sessions and every effort possible will be made to keep the meeting as quiet and orderly as possible. Full co-operation will be given the Convention Chairman in setting up equipment and handling the microphones at all meetings. Monitors will be on hand at least twenty minutes before scheduled meetings are to begin for final instructions.

There will be a meeting of the Monitor Committee Sunday, May 14, 1961, at 4:30 p.m. in the ballroom at which time final arrangements and detail assignments will be made.

### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

R. A. DANIEL, JR., *Chairman*

JOHN W. ATWATER, JR.

ROBERT L. DANIEL

W. H. GRAY, JR.

NEAL SHEFFIELD, JR.

T. Q. SNEED, JR.

C. H. SUGG

C. T. WELLS, JR.

W. K. YOUNG

**Action by House of Delegates:** Received for information, May 14, 1961.

### NECROLOGY COMMITTEE

Obituaries have been prepared by committee members for the following members who have died since our last state meeting: Drs. D. K. Lockhart, B. J. Durham, A. T. Jennette, John Swaim, D. L. Pridgen, A. C. Current, S. Robert Horton, C. R. Riddick, A. J. Pringle, Charles M. Wheeler, Bernard N. Walker.

These obituaries will be published in the Transactions of 1961 in the August issue of the JOURNAL and will not be read at the Necrology Service.

A memorial service for these deceased members has been prepared from the Presbyterian Book of Church Order and the 11th Chapter of the Gospel according to St. John, beginning the 25th verse. A candle will be lighted for each deceased member. Music will be furnished by a quartet from the UNC School of Dentistry under the direction of Dr. Roger Sturdevant and the service will be closed with prayer.

An appropriation request for \$20.00 to cover the expenses of the committee has been approved by the Executive Committee.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

MARCUS R. SMITH, (1965) *Chairman*

BOYCE A. BRAWLEY (1963)

DEWEY BOSEMAN (1964)

D. T. CARR (1961)

W. D. YELTON (1962)

**Action by House of Delegates:** Received for information, May 14, 1961.

**ADVISORY COMMITTEE TO THE  
NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION**

As Chairman of the Committee, I am happy to report that the Dental Assistants' Association is striving to improve their ability to help carry the burdens of dentistry in North Carolina. Their directors met January 8, 1961, and March 12, 1961. They report a membership of 115 and expect it to increase to 160 by the May meeting. They have 18 new certified members that have taken the course this year.

The Dental Assistants' Association directors approved the setting up of a training program at Durham. The House of Delegates of the North Carolina Dental Society approved setting up training centers in North Carolina. The American Dental Association approved one year training for dental assistants. So, if the President can appoint a working committee of interested dentists in or near Durham, the work should be activated without delay. It is very hard for a committee that is from all parts of the state to function with proper efficiency.

The Advisory Committee will hold a very important meeting Monday, May 15, at 5:00 in the Dutch Room of The Carolina.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

C. A. BARKLEY, *Chairman*

RALPH L. FALLS

RICHARD F. HUNT, JR.

NEWTON SMITH

R. S. TURNER

**Action by House of Delegates:** Received for information, May 14, 1961.

**ADVISORY COMMITTEE TO THE NORTH CAROLINA DENTAL  
ASSISTANTS' ASSOCIATION  
Supplemental Report No. 1  
(May 15, 1961)**

The Advisory Committee to the North Carolina Dental Assistants' Association has been interested in the activities and training of dental assistants being trained in the approved training program as set forth by the American Dental Association and the North Carolina Dental Society and the local societies involved.

Now consideration is being given in the development of the programs at Burlington and Gastonia. It is understood that these programs are eligible for considerable financial support from federal and state funds.

The Committee hopes that other centers can meet the above standards and be activated in the near future.

**RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

CARL A. BARKLEY, *Chairman*

**Action by House of Delegates:** Received for information, May 17, 1961.

**ADVISORY COMMITTEE TO THE  
NORTH CAROLINA DENTAL HYGIENISTS' ASSOCIATION**

The only real problem which has been encountered this year concerned accommodations for the Hygienists' Association at the annual meeting in Pinehurst.

Because most of the small hotels in Pinehurst normally close before

the time of our meeting, none of them were willing to remain open and furnish accommodations without a guarantee of at least twenty guests. Determined by a questionnaire sent to all the active members of the Hygienists' Association by their program chairman, Miss Fay Jenny, less than twenty members planned to spend more than one day at the meeting. Therefore, it has been decided to limit their meeting to one day, which will be Monday, for this year.

Since they will not have separate accommodations this year, the Executive Committee approved the use of the Pine Room all day Monday, May 15, for the Hygienists' meetings. In addition, they will have a luncheon and cocktail hour at the Pinehurst Country Club beginning at noon on that date.

It is anticipated that approximately 20-25 Dental Hygienists will attend the one day meeting on Monday.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

A. DWIGHT PRICE, *Chairman*

J. WAYNE MARTIN

H. E. PLASTER

J. G. REHM

JAMES M. ZEALY

**Action by House of Delegates:** Received for information, May 14, 1961.

#### NORTH CAROLINA DENTAL SERVICE CORPORATION COMMITTEE

This committee has reviewed the previously mentioned literature from other states and has consulted with the legal counsel of the North Carolina Dental Society. The committee has been advised by counsel that at the earliest appropriate opportunity we should try to see that proper legislation is initiated looking forward to the formation of a Dental Service Corporation.

The bill amending the Dental Practice Act, however, has priority and the Dental Service Corporation Bill will not be introduced until the above mentioned basic matter has been settled. A bill of this type might present certain pitfalls because, as matters stand, any recognized dental group could establish a Dental Service Corporation in this state without the aid, support, or control of the North Carolina Dental Society.

Definitive action will be reported later in a supplemental report as recommended by the House of Delegates.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

PAUL FITZGERALD, JR., *Chairman*

J. HOMER GUION

C. B. JOHNSON (New Bern)

A. T. LOCKWOOD

J. R. Wheless

**Action by House of Delegates:** Received for information, May 14, 1961.

#### NORTH CAROLINA DENTAL SERVICE CORPORATION COMMITTEE

##### Supplemental Report No. 1

Your Dental Service Corporation Committee wishes to advise that a bill has been drafted, which, upon enactment by the North Carolina Legislature, will provide enabling legislation for the formation of a dental service corporation in North Carolina.

This bill is presently being held in abeyance pending the disposition of other legislative matters which hold priority over it at the moment.

#### RECOMMENDATIONS:

Your committee recommends introduction of this bill at the earliest possible proper moment.

PAUL FITZGERALD, JR., *Chairman*

**Action by House of Delegates:** The report was received for infor-

mation May 17, 1961. The recommendation is identical with Resolution No. 2 contained in Supplemental Report No. 1 of the Legislative Committee adopted May 15, 1961.

### **LIAISON COMMITTEE TO THE OLD NORTH STATE DENTAL SOCIETY**

The committee has nothing to report. Should matters arise for which this committee is responsible, a supplemental report will be submitted.

#### **RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

W. T. RALPH, *Chairman*  
L. M. MASSEY                      H. V. MURRAY  
F. H. WALKER

**Action by House of Delegates:** Received for information, May 14, 1961.

### **COMMITTEE ON PRESIDENT'S ADDRESS**

The Committee on the President's Address wishes to thank Dr. Butler for his excellent presentation and fine report. The address covering the details of an active and important year in the life of our Society deserves the thoughtful consideration of all who were fortunate enough to hear it delivered, and a careful reading by those who were absent on that occasion.

Dr. Butler deserves the gratitude of the North Carolina Dental Society for the faithfulness with which he has carried out the responsibilities of the high office to which he was elected. His insight into present and forthcoming problems and opportunities discloses the thoroughness and devotion which he has manifested in many ways as a great leader and president of our Society.

#### **RECOMMENDATIONS:**

Dr. Butler's address carries three major recommendations, all of which were presented to the House of Delegates through the proper committees with suggested action. Every one of them has been recommended by these committees. The Committee on the President's Address wishes to go on record as endorsing and approving all three recommendations of the President.

JOHN R. PHARR, *Chairman*  
CHARLES H. TEAGUE                      CARL A. BARKLEY

**Action by House of Delegates:** Adopted, May 16, 1961.

### **PROGRAM COMMITTEE**

The first meeting of this committee was held in Greensboro, July 10, 1960, with all members present.

A thorough discussion on program policies, subjects to be presented, and a choice of essayists were made at that time. The committee was in full agreement to extend invitations to the following: Dr. Miles R. Markley, Denver, Colorado, whose subject will be "Amalgam Restorations"; Dr. Walter T. Colquitt, Shreveport, Louisiana, "Everyday Crown and Bridge"; Mr. Ralph Phillips, University of Indiana, "Dental Materials." These men are outstanding in their respective fields, and we feel they will give us an outstanding program. Honorarium of \$250.00 was provided together with first class round trip air travel, meals, and hotel expenses. Arrangements have been made for their transportation to and from Pinehurst, their hotel accommodations, entertainment, and proper introduction before each session.

It was decided to follow the pattern of previous meetings by presenting a thirty minute scientific film before each clinician. Not only is this an educational factor, but it serves the purpose of starting the meeting on time.

Four projected clinics will be presented by Dr. Don L. Allen, Dr.



Murry W. Holland, Dr. Dwight L. Clark, and Dr. David P. Dobson, staff members of the University of North Carolina Dental School.

A wide selection of scientific exhibits have been procured and will be shown in the front lobby and the Cocktail Lounge.

Twenty-one table clinics covering the various fields of dentistry will be presented Wednesday morning.

The committee was fortunate to secure through the Southern Endodontia Study Club, three of its members for a panel discussion on Endodontia: Dr. Robert A. Uchin of Jacksonville, Florida; Dr. Jesse A. Mitchell of Fort Lauderdale, Florida; and Dr. Julian A. Kelley of Atlanta, Georgia. These men were invited to appear on the program without honorarium, but with the understanding that the Society would pay one-day hotel expenses.

Dr. Gerald D. Timmons, Speaker of the House of the American Dental Association, will address the assembly Sunday evening at 8:30. Dr. William A. Garrett of Atlanta, Trustee of the Fifth District of the ADA will also make his report at that time.

I am greatly indebted to each member of this committee, without whose wholehearted co-operation and help, this program would not have been possible.

### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

CHARLES H. TEAGUE, *Chairman*

R. B. BARDEN  
W. S. PEERY

GLENN BITLER  
PEARCE ROBERTS, JR.

**Action by House of Delegates:** Received for information, May 14, 1961.

### PROSTHETIC DENTAL SERVICE COMMITTEE

Because of much important and lengthy activity on the part of the committee during the past year, this report will necessarily be involved. We trust the importance of the committee's functions in the future of the Dental Society will strike your interest and will carry you through the contents.

At the time of this report, there seems to be no reason why a training program for dental technicians will not be inaugurated in September 1961 at the Industrial Education Center in Durham under the direction of the Durham City Schools and supervised by the North Carolina Dental Society. Final approval of the program has not yet been given. However, a supplemental report will be submitted to the House of Delegates which will bring you up-to-date.

The training program for dental laboratory technicians is a direct outgrowth of a request by laboratory men in North Carolina. They sent representatives to Dr. John Brauer at the UNC School of Dentistry to find a method for training technicians. The University turned down this request, and upon further examination, it was discovered the Durham location was available.

When this arrangement was presented to the Officers, Executive and Prosthetic Dental Service Committees of the North Carolina Dental Society on April 3, 1960, in a joint meeting with representatives of the Laboratory Association, it was questioned by the latter group. They agreed to meet with their Association and return to another joint meeting on May 1, 1960. This was done. A flat refusal to accept this change of ideas was expressed by the Laboratory Association and the meeting dissolved with little accomplished.

This lengthy report is felt necessary because some dentists have expressed opinions on this question based on faulty information and it is obviously time the record was righted.

The Officers, Executive and Prosthetic Dental Service Committees considered the above opportunity an open door, which if once closed, might not be opened again for many years. It was agreed to continue exploration of this possibility and meet again in June 1960.

As before, representatives of the North Carolina Dental Laboratory

Association were invited and were present. However, they were adamant in their stand against all evidence that we needed more well-trained laboratory personnel and that these conditions were likely to become progressively worse. Therefore, the meeting as such failed, but it was clear that the Laboratory Association did not represent some of the influential and well-established laboratories in North Carolina and that there was great disharmony within their own membership.

The school officials were greatly interested in the proposition and agreed to delay final partitioning of a section of the building under construction in our favor.

At a meeting of the Officers, Executive and Prosthetic Dental Service Committees of the North Carolina Dental Society on August 27, 1960, we learned that the training program was acceptable to a great many members of the Laboratory Association.

In the meantime Dr. Roger Barton, of the UNC School of Dentistry faculty, and Mr. H. K. Collins, Director of Industrial Education in Durham, traveled to New York and Los Angeles to review methods and technics used by schools already established in those areas for the training of dental technicians.

At a meeting in Greensboro September 10, 1960, President Butler met with the Prosthetic Dental Service Committee. All members but one were present. They were brought up-to-date on the situation and a plan was outlined for the future which especially concerned action to be taken during the district meetings. Those of you who were at the district meetings are aware that this was done. An outline of our purpose was explained to the membership at these gatherings.

On September 30, 1960, just previous to the First District Meeting, Dr. Butler met with the Executive Committee of the North Carolina Dental Laboratory Association and requested that he be allowed to present the idea of a training school for dental technicians to their membership. This was refused and Dr. Butler gave the information to the Executive Committee. At the same time he was able to give them a schedule of short courses especially for dental technicians which would be made available at the UNC School of Dentistry if interest was manifested.

Dr. Butler, Dr. Ross and the Chairman of this committee visited with Dr. Eugene Ziegler in October 1960 and toured a school for dental technicians in operation in Los Angeles. Two North Carolina boys who are enrolled there, along with others, had the highest praise for the training. Not one laboratory exhibiting in the Los Angeles Coliseum who had experience with graduates of the school had anything but compliments for the men and their training. The only objection heard was that there were not enough available to fill the widening gap.

It is hoped that your patience in reading this report has been rewarded by your becoming more informed on an important part of your practice. We cannot agree with the idea of dentists spending hours doing good preparations and then entrusting these in the hands of untrained, inadequate laboratory personnel. At the present rate of growth we will soon find ourselves at the mercy of irresponsible, untrained personnel.

### RECOMMENDATIONS:

1. That the North Carolina Dental Society support the proposed training program for dental technicians to be established at the Industrial Education Center in Durham, with adequate supervision of curriculum whenever required.

2. That no action be taken at this time to reactivate the accreditation program as outlined by the American Dental Association's Council on Dental Trade and Laboratory Relations; but, their recommendations should be retained until final approval by a joint committee from the American Dental Association and the National Association of Dental Laboratories.

3. That the North Carolina Dental Society encourage local and district meetings to include information for the laboratory technicians and that they be invited by personal invitation to attend these meetings.

4. That the University of North Carolina School of Dentistry be encouraged to offer short courses for additional training to be aimed particularly at the dental technicians.

C. P. OSBORNE, JR., (1963) *Chairman*

C. Z. CANDLER, JR. (1964)

JOE V. DAVIS, JR. (1962)

C. D. EATMAN (1965)

J. B. NEWMAN (1961)

Action by House of Delegates: Adopted, May 16, 1961.

### PUBLICITY COMMITTEE

The Publicity Committee has endeavored to improve and increase newspaper coverage of the Annual Session. The following steps have been taken in this effort:

1. Some 42 dentists in major communities in North Carolina with daily newspapers were asked to contact their local newspapers, let them know that releases would be sent from the Central Office and to be on the lookout for them. In some cases these dentists advised the Central Office of specific staff members on the paper who would handle the releases and see that they were published in the paper.

2. Releases were sent from the Central Office not only to newspapers, but also to each of the dentists responsible for contacting their local papers. The dentists were asked to follow through, contact the paper again and make sure the release would get in print.

3. Local dentists were asked to supply their papers with names of local dentists who would be taking part in certain activities at the annual session to give the releases more local color.

With this network of key men in close contact with the local papers it is hoped that good results will be forthcoming. The committee is appreciative of the co-operation and efforts of these men to secure better coverage for our annual session.

The committee has again engaged the services of Mr. A. C. Snow, City Editor of the *Raleigh Times*, to prepare pre-convention releases and to be on hand during the meeting at Pinehurst to file releases with the wire services. Mr. Snow will be handling this assignment for the fourth consecutive year. He also will assist in photographic coverage of the meeting.

### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

T. E. SIKES, JR., (1964) *Chairman*

WALTER H. DAVIS (1965)

Z. L. EDWARDS, JR. (1963)

CLYDE JARRETT, JR. (1961)

C. W. SANDERS (1962)

Action by House of Delegates: Received for information, May 14, 1961.

### RELIEF COMMITTEE

At the beginning of this calendar year, there were two members of the North Carolina Dental Society and a widow of a deceased member receiving aid from the N. C. Dental Relief and American Dental Association Dental Relief Funds—one member from the Second District, one member from the Fourth District and the widow of a deceased member from the First District.

On December 14, 1960, we were grieved to hear of the death of the member from the Fourth District receiving aid from the Society. The death of this member removed from our midst one of the last men who did much toward building the sound foundation on which our Society rests today. His passing was mourned by all who were privileged to know him.

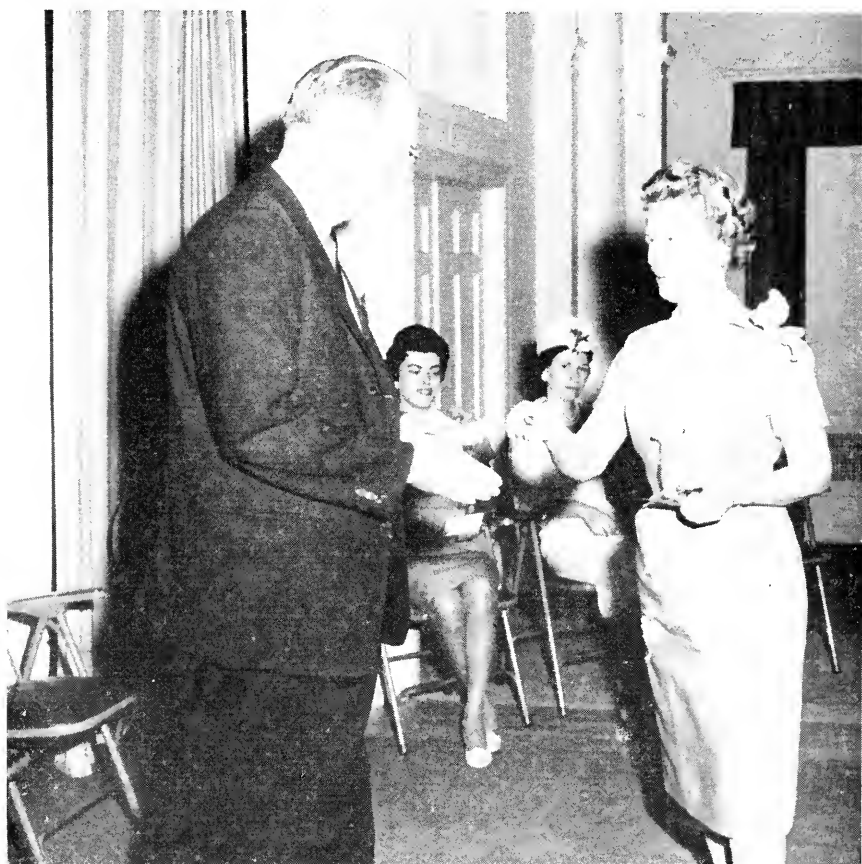
Early in December of 1960, application blanks were requested by the Relief Committee of the First District. This applicant was approved by the Component Society and Relief Committee and signed by the members of the N. C. Dental Relief Committee, and on January 19 was authorized by the A.D.A.

All initial grants are made for a period of six months, and then the

grant may be renewed for one year upon application, if the case warrants it. This member is suffering from infirmities of old age.

The following information is given in order that the membership may know where their relief money is obtained and spent. We received as our part from the Annual Relief Fund Seal Campaign \$968.00, which is one-half of the \$1,936.00, contributed by the members of the Society. In addition, \$484.00 was received from the A.D.A. by virtue of a resolution passed by the House of Delegates of the A.D.A., in 1959 which reads as follows:

"A bonus of one-quarter of the total amount contributed by members of a constituent society in the Annual Relief Fund Seal Campaign will be paid to that society, provided—(1) that society attains the annual quota assigned to it for the previous year and (2) that society pays out in grants the previous year a sum greater than was received as a



NCDS PRESIDENT LUTHER H. BUTLER receives a check in the amount of \$1,727.50 for the NCDS Relief Fund from Auxiliary President Mrs. C. E. Abernethy, the proceeds from the 1960-61 Scrap Amalgam Drive.

regular refund which was shared on an equal basis with the A.D.A. Relief Fund."

This makes a total of \$1,452.00 received from the A.D.A. Relief Fund.

We wish to express our gratitude to the Dental Auxiliary for the continued fine work they are doing in amalgam collections. Last year the scrap amalgam collections yielded \$1,488.25. This brings the grand total received from this source to \$11,928.41, since the Auxiliary made this their major project in 1953-54.

If there are no further changes in the present members receiving aid, the total amount paid to the recipients of the Relief Fund will be \$3,-675.00. One-half of this amount is paid by the A.D.A. Relief Fund and one-half from the N. C. Dental Relief Fund. The N. C. Dental Relief share will be \$1,837.50.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

J. T. LASLEY, (1963) *Chairman*

S. L. BOBBITT (1965)

W. E. CLARK (1961)

J. W. HEINZ (1964)

R. FRED HUNT (1962)

**Action by House of Delegates:** Received for information, May 14, 1961.

#### RURAL HEALTH AFFAIRS COMMITTEE

The Rural Health Affairs Committee has had a very good year. We have participated in every health program available, either by active or delegated action. We have through dental speakers, joined the Medical Society in three area meetings of their Rural Health program. We have urged members of the profession to join in the pre-school examinations where no regular county dentist was employed. The Chairman has served as Chairman of the Executive Committee of the Four County Heart Association this year and is the president-elect of this Association. Other members of the committee have participated in health affairs in their respective communities.

The Health Council of North Carolina met in Raleigh this year and many dentists attended and felt their time was well spent.

The Rural Health Committee of the Medical Society will allow a dentist to participate in their program and area meetings if the dental profession really wants to share the privileges and responsibilities.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

L. M. MASSEY, *Chairman*

S. C. DUNCAN

ROBERT E. LONG

C. M. WHISNANT

R. E. WILLIAMS

**Action by House of Delegates:** Received for information, May 14, 1961.

#### SCIENCE FAIR COMMITTEE

Predecessors of the present committee furnished an adequate supply of materials on dental projects for Science Fairs. In addition, they had already established liaison with state and national interests, making the work much easier.

The greatest need seemed to be interest, at the local level, therefore, the committee's attention was directed to that.

At the request of the North Carolina Academy of Science, the Executive Committee of the North Carolina Dental Society was urged to support the Science Fair program with a \$100.00 contribution. This contribution was approved and duly made.

Each committee member was furnished with at least one copy of all available materials and a mimeographed list of inexpensive booklets (copy of list is attached).

A brief news item was inserted in the Newsletter of this Society for October 1960 urging local dentists to volunteer as consultants for local Science Fairs, and giving sources of pertinent materials.

Another attempt to reach dentists on the local level was made through publication of a short article in the Society's JOURNAL in January (J.N. Car. Dent. Soc. 44: 123, Jan. 61). Appreciation is expressed to the JOURNAL and the Newsletter for their co-operation with the committee.

The committee chairman received inquiries from two dentists (who were not on the committee), and one inquiry was received from a high school student. Committee members were not asked and did not report the number of such contacts.

It is difficult to measure the effectiveness of this type of committee work, but it is felt that much more could and should be done. What form such additional work might take is nebulous.

#### **List of Publications for dentists acting as counselors in Science Fairs:**

**Association Launches Science Fair Program**, see J.A.D.A. 58:114-114, Jan. 1959.

**Dental Projects for High School Science Students**, can be ordered from A.D.A. Order Department, 222 E. Superior St., Chicago 11, Illinois. 50 copies for \$5.00, single copy price unknown. Other information is also available.

**Science Fair Handbook for Exhibitors**, can be ordered from Educational Section, American Museum of Atomic Energy, Box 117, Oak Ridge, Tenn. Free.

**Sponsor Handbook**, can be ordered from Science Clubs of America, 1719 N Street, N.W., Washington 6, D. C. Cost \$1.00, but many related materials are free at this same address.

**The High School Journal for February 1956** has the entire issue devoted to Science Fairs.

**Science Fair Manual**, can be ordered from the Director, North Carolina Science Fairs, Institute of Natural Science, University of North Carolina, Chapel Hill, North Carolina. Free.

#### **RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

C. E. CRANDELL, *Chairman*

S. A. BARKSDALE

M. W. CARPENTER

H. W. CIVILS

ROBERT E. FINCH

**Action by House of Delegates:** Received for information, May 14, 1961.

#### **ADVISORY COMMITTEE TO SCHOOL HEALTH CO-ORDINATING SERVICE**

The Advisory Committee to School Health Co-ordinating Service found no occasion to meet during the past year.

All problems arising were handled on an administrative level within the state.

#### **RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

D. W. SEIFERT, JR., *Chairman*

WALTER E. CLARK

PAUL E. JONES

J. ERNEST ROBERTS

OLIN W. OWEN

**Action by House of Delegates:** Received for information, May 14, 1961.

#### **SKEET SHOOT COMMITTEE**

All necessary arrangements have been made for the annual skeet shoot to be held at the Pinehurst Gun Club at 1:30 p.m. on Sunday, May 14, during the 105th Annual Session.

#### **RECOMMENDATIONS:**

This report is informational in nature and no recommendations are submitted.

H. W. MOORE, *Chairman*

JOHN T. BELL

HUGH HUNSUCKER

**Action by House of Delegates:** Received for information, May 14, 1961.

### STATE INSTITUTIONS COMMITTEE

The State Institutions Committee has proceeded in the following manner to carry out its assignment.

1. The committee has maintained and continued to collect information concerning the current developments in dental problems at the various state institutions. These are filed in the Central Office.

2. Contacted the gubernatorial candidates prior to election concerning our wishes to have a dentist appointed to the Hospitals Board of Control.

3. Contacted Governor Sanford following election concerning this appointment in near future. We are hopeful that he will make such an appointment.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

E. D. BAKER, (1963) *Chairman*

M. L. CHERRY (1965)

D. A. JACKSON (1964)

M. M. LILLEY (1962)

M. H. TRULUCK (1961)

**Action by House of Delegates:** Received for information, May 14, 1961.

### STATE WIDE STUDY CLUB COMMITTEE

The State Wide Study Club Committee has worked in the past to encourage and advise groups of dentists in the formation of study clubs, when requested. The Chairman of the Committee has been responsible for compiling information regarding the activities of all the clubs and in turn publishing that information in each issue of the JOURNAL titled "Study Club Activities of North Carolina." It is hoped that this information serves as a stimulus for the organization of other clubs.

At present there are eight clubs in operation:

Piedmont Study Club

Burlington Study Club

Raleigh Study Club

Demeritt Pedodontic Study Club

Charlotte Study Club

Ernest A. Branch Study Club

Rough Butt Bald Study Club

Guilford Prosthetic Study Club

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

B. B. SAPP, JR., *Chairman*

METT B. AUSLEY

BARRY G. MILLER

J. B. SOWTER

**Action by House of Delegates:** Received for information, May 14, 1961.

### SUPERINTENDENT OF CLINICS COMMITTEE

The function of the Superintendent of Clinics Committee is to supervise and manage the table clinics at the annual state meeting.

In order to pursue this properly the necessary equipment such as tables, covers for the tables, placards, and name plates identifying the clinic and clinician should be available.

A secondary function also is to determine the location within the meeting area where the Table Clinics are to be given and to direct the arrangement of the tables for the various clinics. It must also be available during the presentation of the clinics to give aid and supervision in any capacity possible, also seeing that the clinics are started and closed promptly at a prearranged time.

An appropriation of \$40.00 was requested to cover the cost of signs for the table clinics plus the necessary sheets to cover the tables. This request was approved by the Executive Committee.

The final function of this committee shall be to see that all physical material is removed and stored properly for future use.

#### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

T. L. DIXON, *Chairman*

HARRY N. BALDWIN

J. WAYNE MARTIN

J. E. MOSER

LEDYARD E. ROSS

**Action by House of Delegates:** Received for information, May 14, 1961.

## DENTAL ADVISORY COMMITTEE TO UNIVERSITY OF NORTH CAROLINA

Mainly, the activities of this Committee have been confined to:

1. A complete study of Resolutions 10-1960-H and 11-1960-H as adopted by the House of Delegates of the American Dental Association last October in Los Angeles.

10-1960-H. *Resolved*, that the Council on Dental Education be requested to urge accredited dental schools, including the training activities of the federal dental services, to undertake carefully designed programs of experimentation and research in the training of dental hygienists and dental assistants so that the profession may determine more precisely their individual roles as members of the dental health team and thus enlarge the dental profession's capacity for service to the people of this country.

11-1960-H. *Resolved*, that in any research and experimental programs in the training of dental hygienists and dental assistants authorized by Resolution 10-1960-H, the Council on Dental Education be directed to review the programs with a view to their ultimate evaluation and to urge accredited dental schools, in developing these programs to consult with the constituent dental society and the state board of dental examiners in order to insure that the research and experimental programs are consistent with the policies of the profession in the area.

2. Study of ADA and AMA endorsement relating to the use of matching federal funds for school enlargement programs and scholarships.

3. The necessity for study relating to expansion of the basic science facilities at the University of North Carolina so that when classes in dentistry are increased from fifty to seventy-five and hygienists from fifteen to thirty, adequate facilities will be available.

4. The urgent need for a dental research building at the University and the purpose and reasons for a dental research program.

Concerning Resolutions 10-1960-H and 11-1960-H, your Committee endorsed them unanimously. Further, the Committee adopted the following resolution and transmitted it to the Executive Committee for approval.

WHEREAS, it is recognized by the dental profession and dental educators throughout the country that an adequate number of dental graduates cannot be produced in existing or new schools of dentistry to retain the present dentist-population ratio; and

WHEREAS, it is deemed advisable and important that experience be gained through well controlled research in a school of dentistry, to determine what additional duties or services a dental assistant or dental hygienist may perform beyond that now recognized or accepted by the profession or by law; and

WHEREAS, such research findings are to be presented by all participating schools to the appropriate councils of the American Dental Association, and subsequently to the House of Delegates of the American Dental Association for review, evaluation and action; now, therefore be it

*Resolved*, that the Advisory Committee to the School of Dentistry endorse the resolutions of the House of Delegates of the American Dental Association cited above; and be it further

*Resolved*, that this committee recommend to the Executive Committee and the House of Delegates of the North Carolina Dental Society that the School of Dentistry, University of North Carolina, be encouraged to participate in such research, consistent with the resolutions adopted by the American Dental Association's House of Delegates; and be it further

*Resolved*, that such research be accomplished under the guidance of the Council on Dental Education of the American Dental Association.

On March 16, the Executive Committee approved the above resolution.

The Committee also recommended the establishment by the U. S. Navy of a pilot research study at the UNC School of Dentistry to determine the precise roles of Navy dental auxiliary personnel in accordance with Resolutions 10-1960-H and 11-1960-H of the ADA House of Delegates.



This recommendation was to be submitted to the Executive Committee for approval and then transmitted to the House of Delegates for information.

On March 16, the Executive Committee approved the above recommendation and directed that it be forwarded to the House of Delegates for approval.

Conclusion: It is well known how urgent and necessary it is that dental manpower and dental auxiliary personnel be speedily developed in order to care for our rapid increase in population. It is known also how vital and necessary research is to dentistry. We are aware of the necessity for long range study and planning relating to these needs and shall make every effort to study and push forward in each particular field, hopeful of keeping dentistry in North Carolina in the vanguard of development and progress.

### RECOMMENDATIONS:

The Dental Advisory Committee to UNC recommends:

1. That the House of Delegates approve the resolution adopted by the Dental Advisory Committee to UNC and approved by the Executive Committee encouraging the UNC School of Dentistry to participate in a program of research in the training of dental hygienists and dental assistants consistent with resolutions 10-1960-H and 11-1960-H of the ADA House of Delegates.

2. That the House of Delegates approve the recommendation of the Dental Advisory Committee to UNC that the U. S. Navy's proposed pilot research study to determine the precise role of Navy dental auxiliary personnel be conducted at the UNC School of Dentistry.

C. W. SANDERS, *Chairman*

RILEY E. SPOON, JR.

R. B. BARDEN

S. L. BOBBITT

WADE H. BREELAND

D. T. CARR

A. P. CLINE

CHARLES S. COOKE

W. K. GRIFFIN

W. T. MCFALL

C. C. POINDEXTER

Action by House of Delegates: Adopted, May 16, 1961.

### ADVISORY COMMITTEE TO THE VETERANS' ADMINISTRATION PROGRAM

The untimely death of the Chairman of this Committee, Dr. Bernard N. Walker, has saddened and shocked each one of us very deeply.

Although I realize that this is probably not the suitable place to eulogize, I cannot refrain from making note of the tremendous service given by Bernard with all his fervent sincerity to our State Society through his many years with us.

Much work has been accomplished by this committee under several years of his chairmanship. However, there has been no occasion to transact any business or to have a called meeting of this committee this year. Therefore, I consider this report to be informational in nature.

### RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted:

GUY R. WILLIS, (1965) *Chairman*

H. E. PLASTER (1961)

L. D. HERRING (1963)

COYTE R. MINGES (1964)

Action by House of Delegates: Received for information, May 14, 1961.

### VISUAL EDUCATION AND SCIENTIFIC EXHIBITS

The above named committee has secured the following Visual Education material to be shown at the annual meeting of the North Carolina Dental Society. These films will be presented at the beginning of the

Monday morning and afternoon and Tuesday afternoon sessions.

1. Prescription Writing in Modern Dentistry
2. Operation Teamwork
3. Mouth Preparation Before Removable Partial Denture Impressions
4. Audioc

The largest Scientific Exhibits in many years will be displayed. They are:

1. American Cancer Society—"Cancer of the Head and Neck"  
"Role of the Dentist in Cancer Control"
2. Lyon P. Streat, Ph.D., D.D.S. — "Congenital Abnormalities and Their Oral Manifestations"
3. A Norman Cranin, D.D.S.—"The Intramucosal Insert: An Aid in Maxillary Retention"
4. R. S. Griffith, M.D.—"The Erythromycins—Newer Concepts"
5. American Dental Association—"Educational Materials"
6. American Heart Association—Exhibit
7. The National Dairy Council—Exhibit
8. Oral Hygiene Division of North Carolina State Board of Health—Exhibit
9. School of Dentistry, University of North Carolina—Exhibit

As recommended in the year preceding, your committee has worked closely with the Executive Secretary and members in our Central Office who have been most helpful with this planning.

#### RECOMMENDATIONS:

It is suggested that the future Chairman and Co-Chairman of this committee be selected from a group of members who will be in attendance at the 1961 meeting of the American Dental Association. This is thought advisable because most scientific exhibits are shown at that time and their availability may be determined and secured for the North Carolina Dental Society meeting in 1962.

PEARCE ROBERTS, JR., *Chairman*

CECIL A. PLESS, JR., *Co-Chairman*

R. J. SHANKLE

M. R. EVANS

**Action by House of Delegates:** Adopted, May 15, 1961.

# Miscellaneous Recommendations

SUBMITTED TO THE  
1961 HOUSE OF DELEGATES

The following recommendation was presented to the House of Delegates of the North Carolina Dental Society at the 104th Annual Session, Pinehurst, North Carolina, May 2, 1960:

"That the House of Delegates instruct the Legislative Committee to use all means at its disposal to secure legislation at the next session of the North Carolina Legislature to enable dentists to sign death certificates."

The 1960 House of Delegates tabled the recommendation.

The recommendation was removed from the table at the 1961 House of Delegates for consideration.

**Action by House of Delegates:** Rejected, May 15, 1961.



HOUSE OF DELEGATES. 105th Annual Session, Pinehurst.

# House of Delegates

## ATTENDANCE RECORD

	M E E T I N G S			
	First May 14	Second May 15	Third May 16	Fourth May 17
SPEAKER OF THE HOUSE				
Ralph D. Coffey.....	X	X	X	X
OFFICERS				
Luther H. Butler, President.....	X	X	X	X
Norman F. Ross, President-Elect..	X	X	X	X
S. P. Gay, Vice President.....	X	X	X	X
S. Byron Towler, Secretary-Treas.	X	X	X	X
EXECUTIVE COMMITTEE				
Riley E. Spoon, Jr., Chairman.....	X	X	X	X
S. H. Isenhower.....	X			X
Darden J. Eure.....	X	X	X	X
W. B. Sherrod.....	X	X	X	X
ETHICS COMMITTEE				
G. L. Hooper, Chairman.....	X	X	X	X
A. C. Current, Jr.....	X	X	X	X
Thomas G. Nisbet.....	X	X	X	X
H. Estes Butler.....	X	X	X	X
Clyde E. Minges.....	X	X	X	
STATE BOARD OF HEALTH— MEMBER				
Z. L. Edwards.....	X	X	X	
STATE BOARD OF DENTAL EXAMINERS				
Horace K. Thompson.....	X	X		X
S. W. Shaffer.....	X	X		X
FIRST DISTRICT				
Dennis S. Cook.....	X			
A. T. Lockwood .....	X	X	X	X
M. M. Forbes.....	X	X	X	X
John W. Girard.....	X	X	X	X
C. Z. Candler, Jr.....	X	X	X	X
A. P. Cline (A).....		X	X	

	M E E T I N G S			
	First May 14	Second May 15	Third May 16	Fourth May 17
SECOND DISTRICT				
James A. Harrell.....	X	X	X	X
L. C. Holshouser.....	X	X	X	X
James E. Graham, Jr.....		X	X	X
W. Stewart Peery.....	X	X		
Robert A. George.....	X	X	X	
L. B. Peeler (A).....			X	X
Frank H. Walker (A).....				X
THIRD DISTRICT				
W. P. Hinson, Jr.....	X	X	X	X
M. L. Cherry.....	X	X	X	X
C. W. Poindexter.....	X	X	X	X
J. T. Lasley.....	X	X	X	X
C. H. Teague.....	X	X	X	
T. E. Sikes, Jr. (A).....				X
FOURTH DISTRICT				
T. G. Collins.....	X	X	X	X
C. P. Osborne, Jr.....	X	X	X	X
L. D. Herring.....	X	X	X	X
C. W. Sanders.....	X	X	X	X
Marcus R. Smith.....	X	X	X	X
FIFTH DISTRICT				
R. Fred Hunt.....	X	X	X	
Coyte R. Minges.....	X	X	X	
W. W. Umphlett.....	X		X	X
C. B. Johnson (New Bern).....	X	X	X	
R. H. Gilbert.....	X	X	X	
R. A. Daniel, Jr. (A).....		X		
C. P. Godwin (A).....				X
James A. Ward (A).....				X
M. M. Lilley (A).....				X
Junius H. Rose, Jr. (A).....				X
<b>TOTAL PRESENT</b> .....	<u>40</u>	<u>40</u>	<u>38</u>	<u>38</u>

# Scientific Sessions

ESSAYS

TABLE CLINICS

PROJECTED CLINICS

## ESSAYS

1. **Evaluation of Newer Dental Materials and Technics and Factors Affecting Their Clinical Success**, Ralph W. Phillips, F.A.C.D., F.I.C.D., Indiana University of Dentistry.
2. **Saving "Hopeless" Teeth**, Miles R. Markley, D.D.S., F.A.C.D., Denver, Colorado.
3. **Conserving Teeth and Tooth Structure with Emphasis on Improved Cavity Preparation for Amalgam**, Miles R. Markley, D.D.S., F.A.C.D., Denver, Colorado.
4. **Everyday Crown and Bridge**, Walter T. Colquitt, D.D.S., F.A.C.D., Shreveport, Louisiana.

## TABLE CLINICS

1. **The Immediate Partial—Space Maintainers**, Fred N. Ogden, D.D.S., Waynesville.
2. **Practical Use of Bite-Wing X-Rays in Daily Practice**, Milton S. Thurston, D.D.S. and C. F. Sherman, D.D.S., Salisbury.
3. **Check-Bite Impression Procedure**, W. E. Crow, D.D.S. and Bill J. Christian, D.D.S., Winston-Salem.
4. **Pedodontia for the Practitioner**, James B. King, Jr., D.D.S., Pittsboro.
5. **Crown and Bridge Procedures**, Baxter B. Sapp, Jr., D.D.S., Duke University Medical Center.
6. **Cold Polymerization Under Pressure, an Office Procedure**, H. Estes Butler, D.D.S., Greensboro.
7. **The Mandibular Lateral Incisor**, Galen W. Quinn, D.D.S., Duke University Medical Center.
8. **Appliance Therapy for the Correction of Crossbites in the Mixed Dentition**, Henry S. Zaytoun, D.D.S., Raleigh.
9. **Chairside Convincing Through Slide Projection**, R. H. Turlington, D.D.S., Clinton.
10. **Clinical Considerations of Stannous Fluoride**, J. Fred Sproul, D.D.S., Raleigh.
11. **Surgical Aids in Prosthetic Denture Construction**, Grover W. Smith, D.D.S., Kinston.
12. **Everyday Periodontics**, Capt. Charles Pridgen, D.C., USN, Camp LeJeune.
13. **North Carolina Dental Hygienists' Association.**

**TABLE CLINICS (cont.)**

14. **North Carolina Dental Assistants' Association.**
15. **Children's Dentistry**, Carlton V. Winter, D.D.S., Charlotte.
16. **A Technique for Dental Transplants**, Jere E. Roe, D.D.S., Raleigh.
17. **One Sitting Root Canal Therapy**, O. R. Pearce, Jr., D.D.S., and M. W. Aldridge, D.D.S., Greenville.
18. **Endodontia**, R. J. Shankle, D.D.S., UNC School of Dentistry.
19. **Motivation**, Mett B. Ausley, D.D.S., Warsaw.
20. **Crown and Bridge**, James H. Lee, D.D.S., Mount Holly.
21. **Photo-elastic Stress Analysis of Class II Cavity Designs**, C. L. Sockwell, D.D.S., UNC School of Dentistry.

**PROJECTED CLINICS**

1. **Principles of Splinting as Applied to Periodontics**, Don L. Allen, D.D.S., U.N.C. School of Dentistry.
2. **Esthetics in Crown and Bridgework**, Murry W. Holland, D.D.S., U.N.C. School of Dentistry.
3. **Visual Aids Used in Teaching Removal of Lower Third Impacted Molars**, Dwight L. Clark, U.N.C. School of Dentistry.
4. **Common Faults in Full Denture Construction**, David P. Dobson, D.D.S., U.N.C. School of Dentistry.



ELECTION NIGHT. 105th Annual Session, Pinehurst.

# General Sessions

SUNDAY, MAY 14, 1961, 8:30 p.m.  
MONDAY, MAY 15, 1961, 9:30 a.m.  
MONDAY, MAY 15, 1961, 8:00 p.m.  
WEDNESDAY, May 17, 1961, 11:30 a.m.

## FIRST GENERAL SESSION

Sunday, May 14, 1961

The 105th Annual Session of the North Carolina Dental Society was called to order by President Luther H. Butler at 8:45 p.m., Sunday, May 14, 1961, in the Ballroom of The Carolina, Pinehurst, North Carolina.

The invocation was given by Dr. Amos S. Bumgardner.

A memorial service was conducted by Dr. Marcus R. Smith, Chairman of the Necrology Committee, in memory of the following members who had died since the last annual meeting: Alfred Cornelius Current, Benjamin Durham, Sylvester Robert Horton, William A. Ingram, Alexander Tunnell Jennette, David Kelly Lockhart, D. LeRoy Pridgen, Alonso J. Pringle, Charles Roberts Riddick, John Swaim, Bernard Newman Walker and Charles M. Wheeler.

Choral music for the service was provided by the UNC School of Dentistry Chorus under the direction of Dr. Roger E. Sturdevant.

Out-of-state guests and distinguished visitors were introduced and welcomed by Dr. C. W. Poindexter, Chairman of the Hospitality Committee.

Dr. John C. Brauer, Dean, UNC School of Dentistry, introduced Dr. William A. Garrett of Atlanta, Trustee of the Fifth District of the American Dental Association, who spoke briefly.

Dr. Baxter B. Sapp, Jr., introduced Dr. Gerald D. Timmons, Speaker of the House, American Dental Association and Dean, Temple University School of Dentistry. Dr. Timmons brought greetings from the American Dental Association and spoke of the problems facing dentistry now and in the future and the responsibility of the dental profession to provide the answers to these problems in the years ahead.

Secretary-Treasurer S. Byron Towler read a letter from Dr. Harry Lyons, Dean of the School of Dentistry of the Medical College of Virginia, and telegrams from the American Dental Association and the North Carolina Dental Assistants' Association extending best wishes to the Society for a successful meeting.

Executive Secretary A. M. Cunningham announced that the registration totalled 413 as of 5:00 p.m. Sunday, including 214 members. He also recognized Past President W. T. Martin of Raleigh who was attending his 52nd meeting of the North Carolina Dental Society.

The Secretary-Treasurer was directed to send special messages to Dr. L. G. Coble of Greensboro and Dr. John A. McClung of Winston-Salem who were unable to be present because of illness.

The meeting was adjourned at 10:10 p.m.



## SECOND GENERAL SESSION

### Monday Morning, May 15, 1961

The Second General Session of the 105th Annual Session of the North Carolina Dental Society was called to order by President Luther H. Butler at 9:45 a.m., Monday, May 15, 1961, in the Ballroom of The Carolina, Pinehurst, North Carolina.

The invocation was given by Dr. S. E. Moser.

Out-of-state guests and distinguished visitors were introduced and welcomed by Dr. C. W. Poindexter, Chairman of the Hospitality Committee.

Mrs. C. E. Abernethy, President of the North Carolina Dental Auxiliary, brought greetings from the Auxiliary and presented President Butler a check in the amount of \$1,727.50 payable to the North Carolina Dental Society Relief Fund. This amount represented the proceeds from the 1960-61 Scrap Amalgam Drive sponsored by the Auxiliary. President Butler expressed the appreciation of the Society for the contribution of the Auxiliary to the Relief Fund and to Mrs. W. W. Rankin, Chairman of the 1960-61 Scrap Amalgam Drive.

The following brought greetings from their associations: Miss Calyle Cromwell, President, North Carolina Dental Assistants' Association; Mrs. Vee C. Hoppe, President, North Carolina Dental Hygienists' Association; and Dr. H. Royster Chamblee, President Dental Foundation of North Carolina, Incorporated.

Vice President S. P. Gay assumed the chair while President Butler delivered his presidential address.

The meeting was adjourned at 10:40 a.m.

## THIRD GENERAL SESSION

### Monday Evening, May 15, 1961

The Third General Session of the 105th Annual Session of the North Carolina Dental Society was called to order by President Luther H. Butler at 8:30 p.m. Monday, May 15, 1961, in the Ballroom of The Carolina, Pinehurst, North Carolina.

The invocation was given by Dr. Boyce A. Brawley.

Out-of-state guests and distinguished visitors were introduced and welcomed by Dr. C. W. Poindexter, Chairman of the Hospitality Committee.

Executive Secretary A. M. Cunningham announced that the registration totalled 1,169 as of 5:00 p.m. Monday, including: 605 members, 192 Auxiliary members, 128 exhibitors, 158 guests, 28 hygienists and 58 dental students.

Dr. H. Royster Chamblee, Chairman of the Legislative Committee, introduced Colonel W. T. Joyner, legal counsel for the Society. Colonel Joyner explained the legislation sponsored by the Society and made law by the 1961 General Assembly which provides for the election of members of the State Board of Dental Examiners by every dentist licensed and residing in North Carolina.

President Butler announced the appointment of the following to serve as tellers for the election of officers: Drs. Marcus R. Smith, Frank H. Walker and James A. Harrell.

Officers for 1961-62 were elected as follows:

President-Elect — Dr. E. D. Baker, Raleigh.

Vice President — Dr. Dennis S. Cook, Lenoir.

Secretary-Treasurer — Dr. S. Byron Towler, Raleigh.

Delegates to the American Dental Association House of Delegates were elected as follows: Frank O. Alford (1964), Erbie M. Medlin (1964) and Ralph D. Coffey (1962). Dr. Coffey was elected to fill the unexpired term of Walter T. McFall who resigned.

By majority vote Pinehurst was selected as the site for the 107th Annual Session in 1963. The dates are May 5-8, 1963.

The meeting was adjourned at 9:30 p.m.

#### FOURTH GENERAL SESSION

Wednesday, May 17, 1961

The Fourth General Session of the 105th Annual Session of the North Carolina Dental Society was called to order by President Butler at 11:45 a.m., Wednesday, May 17, 1961, in the Ballroom of The Carolina, Pinehurst, North Carolina.

The invocation was given by Dr. C. D. Wheeler.

Executive Secretary A. M. Cunningham announced that registration for the 105th Annual Session totalled 1,622, the largest number on record to register at an annual meeting. Included in the total were 735 members representing 63 per cent of the membership.

President Butler installed President-Elect Norman F. Ross as President of the North Carolina Dental Society for the year 1961-1962.

Dr. Ross installed the newly elected officers as follows:

President-Elect—E. D. Baker.

Vice President—Dennis S. Cook.

Secretary-Treasurer—S. Byron Towler.

Delegates to the American Dental Association—Frank O. Alford (1964), Ralph D. Coffey (1962), and Erbie M. Medlin (1964).

Dr. Glenn Bitler, Chairman of the Clinic Board of Censors, reported that the following table clinics presented at the 105th Annual Session had been selected to be recommended for presentation at the next annual meeting of the American Dental Association: Crown and Bridge Procedures, Dr. Baxter B. Sapp, Jr.; The Mandibular Lateral Incisor, Dr. Galen W. Quinn; Chairside Convincing Through Slide Projection, Dr. R. H. Turlington; Children's Dentistry, Drs. Barry G. Miller and Carlton V. Winter; and Photoelastic Stress Analysis of Class II Cavity Design, Dr. C. L. Sockwell.

Dr. Ross announced the following appointments:

Dr. Pearce Roberts, Jr., Member of the Executive Committee for three years and Chairman for the year 1961-62.

Dr. Baxter B. Sapp, Jr., Chairman of the Program Committee for the year 1961-62.

The 105th Annual Session of the North Carolina Dental Society was adjourned sine die at 12:15 p.m.

(Following adjournment door prizes were awarded.)

# Registration

105TH ANNUAL SESSION  
PINEHURST, NORTH CAROLINA  
MAY 14-17, 1961

## NCDS Members

First District .....	111 (47%)	
Second District .....	178 (62%)	
Third District .....	183 (67%)	
Fourth District .....	150 (77%)	
Fifth District .....	113 (64%)	735 (63%)

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Visiting Dentists .....	93
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## Students

Dental .....	144	
Hygienists .....	7	151

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Dental Assistants.....	97
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Dental Hygienists .....	28
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Dental Auxiliary .....	234
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Exhibitors .....	130
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Guests .....	154
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Total Registration .....	1,622
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# North Carolina State Board of Dental Examiners

S. L. BOBBITT, D.D.S. (1963)  
*President*  
J. HOMER GUION, D.D.S. (1961)  
*Secretary-Treasurer*  
G. SHUFORD ABERNETHY, D.D.S.  
(1963)  
WADE H. BREELAND, D.D.S. (1962)  
S. W. SHAFFER, D.D.S. (1962)  
HORACE K. THOMPSON, D.D.S.  
(1961)

## NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

February 14, 1961

Honorable Terry Sanford  
Governor of North Carolina  
Raleigh, North Carolina

Dear Sir:

In accordance with the provision of the Dental Law, I wish to hand you herewith a report of the proceedings of the North Carolina State Board of Dental Examiners for the calendar year 1960.

Three meetings of the Board have been held during the year.

A special meeting of the North Carolina State Board of Dental Examiners was held at the Carolina Hotel, Pinehurst, North Carolina, May 3, 1960, for the purpose of making plans for the annual examination to be given at the Dental School, University of North Carolina, Chapel Hill, North Carolina, beginning June 27, 1960, and to transact any other business coming before the Board.

All members of the Board were present, with Dr. Wade H. Breeland, President, presiding. Dr. Darden Eure, former member of the Board, was present.

The minutes of the last two meetings were read by the Secretary and approved.

Dr. Wade H. Breeland and Dr. J. H. Guion reported on the January 9th, 1960, meeting of the Conference of Southern Dental Deans held in Biloxi, Mississippi. The Secretary also reported on the meeting of the American Association of Dental Examiners and the Council on Dental Education meeting held in Chicago, February 5, 6, and 7, 1960.

A letter was read from Dr. Allen Lockwood, of Asheville, North Carolina, concerning the possibility of placing a dental hygienist at Western Carolina Industries. Since the hygienist would not be under the supervision of a dentist except on part time basis, the Board ruled that this case would not conform to the dental hygiene law.

The Secretary reported on an investigation under way on Mr. Frank Roberts, of Asheville, North Carolina, and Lorenzo L. Campbell, of Fayetteville, North Carolina.

After a discussion of the State Board examination schedule, motion was made and seconded that we proceed as last year.

A motion was made and seconded that the Board meet at the Carolina Inn, Chapel Hill, North Carolina, June 25, 1960, at five o'clock p.m. for our regular annual meeting and to examine the applications of the applicants for the dental examination and dental hygiene examination, beginning June 27, 1960, at nine o'clock a.m. at the School of Dentistry, University of North Carolina, Chapel Hill, North Carolina.

There being no further business, the meeting adjourned.

The second meeting of the Board of Dental Examiners was the eightieth regular annual meeting at the Carolina Inn, Chapel Hill, North Carolina, beginning Monday morning, June 27, 1960, at nine o'clock a.m. for the purpose of examining applicants for licensure, and to dispose of any other business coming before the Board.

The Board met in executive session Saturday afternoon, June 25, 1960, at five o'clock p.m. to examine the applications of the applicants for examination, and to arrange the schedule for the examination to begin Monday morning.

All members of the Board were present, with Dr. Wade H. Breeland, President, presiding.

Eighty-one applications for dental examination and eighteen applications for dental hygiene examination were examined, and all were found in order.

Applicant No. 2, Dr. John Barrington Mills; Applicant No. 3, Dr. Jerome Chester Stoopack; and Applicant No. 5, Dr. John Gus Calavaris, withdrew prior to the examination and requested that they be given permission to take the examination at our next annual meeting in 1961. Permission was granted. The remaining applicants, having complied with the requirements of the North Carolina State Board of Dental Examiners, were permitted to take the examination given by the Board.

The written examinations were held in the auditorium of the Memorial Hospital, and the clinical examinations were held in the Dental School of the University of North Carolina. The examinations started at 9:00 o'clock a.m., Monday, June 27, 1960, and continued until 5:00 o'clock p.m., Thursday, June 30, 1960.

The Board voted to meet at the Sir Walter Hotel, Raleigh, North Carolina, Saturday, July 16, 1960, at 5:00 o'clock p.m. for the purpose of canvassing the grades of the applicants who participated in the examination beginning June 27, 1960.

There being no further business and the examinations having been completed, the Board adjourned at 6:00 o'clock p.m., Thursday, June 30, 1960.

The third meeting of the North Carolina State Board of Dental Examiners was a special meeting held at the Sir Walter Hotel, Raleigh, North Carolina, on July 16 and 17, 1960, for the purpose of canvassing the grades of applicants examined beginning June 27, 1960, at the School of Dentistry, University of North Carolina, Chapel Hill, North Carolina, and to transact any other business coming before the Board.

All members of the Board were present with Dr. Wade H. Breeland, President, presiding. The minutes of the last two meetings were read and approved.

A motion was made and passed that Dr. J. H. Guion be paid per diem and travel for attending the hearing in City Records Court, Asheville, North Carolina, November 27, 1959, for Dr. L. V. Grady, charged with practicing dentistry without a license.

The Secretary reported that Dr. William McDonald Walker's check for 1960 renewal license, plus \$5.00 penalty, had been returned due to insufficient funds. A motion was made and seconded that renewal license No. 1385, issued to Dr. Walker, be recalled.

The Board voted to allow the following per diem:

- 1 day special meeting, Chapel Hill, N. C. (Dec. 2, 1959)
- 1 day special meeting, Pinehurst, N. C. (May 3, 1960)
- 7 days examination, Chapel Hill, N. C. (June 25-July 1, 1960)
- 2 days canvassing grades, Raleigh, N. C. (July 16, 17, 1960)
- 15 days making up examination and grading papers

—  
26 days per diem total.

The officers elected for the ensuing year were as follows:

President—Dr. S. L. Bobbitt

Secretary-Treasurer—Dr. J. H. Guion

Delegates to the North Carolina Dental Society:

Dr. Horace K. Thompson

Dr. S. W. Shaffer

## Delegates to the American Association of Dental Examiners:

Dr. J. H. Guion

Dr. Wade H. Breeland

The results of the tabulation of the grades of the examination given beginning June 27, 1960, in Chapel Hill, North Carolina, revealed the following applicants for dental licensure, having made an average of 80 per cent or more, were issued license to practice dentistry in North Carolina:

<i>Name</i>	<i>Address</i>	<i>License No.</i>
Oscar Hubert Brown, Winterville, N. C.		2697
Ernest Eugene Lumpkin, Jr., Raleigh, N. C.		2698
Thomas Bonifer Cornell, Avon Park, Fla.		2699
George Howard Thomas, Asheville, N. C.		2700
John Lee Thompson, Jr., Dobson, N. C.		2701
Donald Grady Cheek, APO New York, N. Y.		2702
Bruce Hugh Hawkins, Mars Hill, N. C.		2703
Edward Flynn Harris, Virginia Beach, Va.		2704
Charles Lee Griffith, Burnsville, N. C.		2705
Joe Baxter Roberson, Asheville, N. C.		2706
James B. Graham, Boone, N. C.		2707
William Danford Wilson, Gastonia, N. C.		2708
Lad Landau, II, Greensboro, N. C.		2709
Galen Gartner Moser, Chapel Hill, N. C.		2710
David Hales Freshwater, Chapel Hill, N. C.		2711
Rollin Main Ransom, Jr., Hartford, Conn.		2712
Robert Wiley Addison, Pittsburg, Pa.		2713
Hubert Edwin Hatcher, Morrisville, N. C.		2714
Eugene Carl Deibler, Chapel Hill, N. C.		2715
Kenneth Holmes Oakley, Jr., Raleigh, N. C.		2716
Fabian Morgan, Goldsboro, N. C.		2717
Wilbert Worth Blackman, Charleston, S. C.		2718
Richard Norfleet Hines, Jr., Edenton, N. C.		2719
Donald Clayton Griffin, Reidsville, N. C.		2720
Frank Heinsohn, Jr., Charleston, S. C.		2721
Hudson Wilson Shoulars, Jr., Rich Square, N. C.		2722
John Lafayette Irvin, Chapel Hill, N. C.		2723
Matthew Guy Delbridge, Chapel Hill, N. C.		2724
Raymond Andrew McKee, Mooresville, N. C.		2725
Warden Lewis Woodard, Jr., Garner, N. C.		2726
Robert Marvin Kriegsman, Greensboro, N. C.		2727
Charles Wayne Hoover, Winston-Salem, N. C.		2728
Virgil McKee Morrison, Raleigh, N. C.		2729
Keith Lambeth Bentley, North Wilkesboro, N. C.		2730
Phil Snead Sanders, Four Oaks, N. C.		2731
Luby Thaddeus Sherrill, Jr., Shelby, N. C.		2732
Robert Lee Farmer, Greensboro, N. C.		2733
Charlie William Surles, Jr., Chapel Hill, N. C.		2734
Walter Alston White, Warrenton, N. C.		2735
William DeVane Maulsby, Whiteville, N. C.		2736
Joe Thomas Wall, Lilesville, N. C.		2737
Frederick Howard Howdy, Washington, N. C.		2738
William Parham Tally, Lillington, N. C.		2739
Theodore Casper Hesmer, Wilson, N. C.		2740
James Roderick Smith, Whiteville, N. C.		2741
Charles Joseph Schlapkohl, Pompano Beach, Fla.		2742
Townsend Van Holt, Williamston, N. C.		2743
Robert Waide Holmes, Lexington, N. C.		2744
Edward Neese Pridgen, Fayetteville, N. C.		2745
John Frederick Lemler, Durham, N. C.		2746
Gerald Calvin Webb, Atlanta, Ga.		2747
Thomas Allison Morris, Sylva, N. C.		2748
Sanford Webb Thompson, III, Raleigh, N. C.		2749
Eli Edward White, Jr., Sanford, Fla.		2750

<i>Name</i>	<i>Address</i>	<i>License No.</i>
Ronald Wayne Whitson, El Paso, Texas.....		2751
George Ira Miller, Webster, N. C.....		2752
Clemuel Mansey Johnson, Benson, N. C.....		2753
Alexander Graham Ray, High Point, N. C.....		2754
Charles Rosser Wilson, Laurinburg, N. C.....		2755
Erby Rudolph Oglesby, Ft. Belvoir, Va.....		2756
John Raymond Oliver, Jr., Winston-Salem, N. C.....		2757
Sewell Rayburn McKinney, Memphis, Tenn.....		2758
Robert McDonald Diggs, Charleston, S. C.....		2759

The following applicants for Dental Hygiene license, having made an average of 80 per cent or more, were issued license to practice dental hygiene in North Carolina:

Jackelyn Rae Kelly, Kinston, N. C.....	141
Alleyne Carton Boyette, Chapel Hill, N. C.....	142
Carol Sue Dent, Reidsville, N. C.....	143
Barbara Ray Milone, Effingham, Ill.....	144
Barbara Sue Smith, Winston-Salem, N. C.....	145
Dandridge Dean Baily, Lenoir, N. C.....	146
Laura Elizabeth Overcash, Concord, N. C.....	147
Jacqueline Rice Riggsbee, Carrboro, N. C.....	148
Nancy Jo Traylor, New Bern, N. C.....	149
Judith Anne Harward, Chapel Hill, N. C.....	150
Virginia Shaver Watson, Winston-Salem, N. C.....	151
Barbara Justice Lail, Hickory, N. C.....	152
Joyce Cecelia Carter, Charlotte, N. C.....	153
Wanda Ruth Ware, Burlington, N. C.....	154
Shirley Ann Jordan, Asheville, N. C.....	155
Margaret June Parker, Charlotte, N. C.....	156
Sandra Laws Finch, Chapel Hill, N. C.....	157
Enola Brown Best, Fayetteville, N. C.....	158

The following applicants for dental license, having made an average grade of less than 80 per cent, were declared to have failed the examination:

<i>Name</i>	<i>Address</i>
Otho Carl Faulkner, Hamlet, N. C.	
James Robert Fields, Dunn, N. C.	
Donald Clarence Boggs, Mt. Vernon, Ala.	
James Ray Wampler, Harrisonburg, Va.	
Lemuel Dwight Ware, Kings Mountain, N. C.	
Bobby Alton Lomax, Lexington, N. C.	
Kenneth Ray Wynn, Hendersonville, N. C.	
Andrew John Miketa, Carrboro, N. C.	
Durel Gray Long, Washington, D. C.	
Albert Junior Smith, Bristol, Tenn.	
George Mims Clark, Newport, Tenn.	
Willie Thomas Wilkins, Jr., Greensboro, N. C.	
Hoover Curtis Bowens, Wilson, N. C.	
Jerrold Franklin Graves, Greensboro, N. C.	
Julian Sayre Rexton, Evanston, Ill.	

There being no further business, the Board adjourned at 6:00 o'clock p.m.

I am enclosing a financial statement of the Board of Dental Examiners as of January 1, 1960, to December 31, 1960, which was compiled by Certified Public Accountants.

Respectfully submitted,

J. H. GUION, D.D.S.  
Secretary-Treasurer  
North Carolina State Board  
of Dental Examiners

## CONDENSED CASH RECEIPTS AND DISBURSEMENTS

Year Ended December 31, 1960

Cash on Hand and in Bank January 1, 1960.....	\$10,335.41
Cash Receipts During Year:	
Dental Licenses Issued.....	\$ 6,950.00
Hygienist Licenses Issued.....	230.00
Dental Examination Fees.....	2,310.00
Hygienist Examination Fees.....	340.00
Miscellaneous Income.....	84.00
Total Cash Receipts.....	9,914.00
Total Cash to be Accounted for.....	\$20,249.41

## Cash Disbursements During Year:

## Salaries:

## Secretary and Treasurer,

Dr. J. H. Guion.....\$ 1,500.00

## Assistant Secretary,

Ellen Garrison ..... 1,018.20 \$ 2,518.20

## Per Diem Travel Expenses of State

Board ..... 2,030.42

## Dues—American Association of

Dental Examiners ..... 75.00

Board Meetings &amp; Examination Expense..... 777.24

Postage, Printing &amp; Office Supplies..... 677.40

Telephone &amp; Telegraph..... 66.51

Auditing ..... 125.00

Refund License Fees..... 5.00

Dentistry School of Research &amp; Education..... 390.00

Attorney Fees and Expenses..... 3,118.11

Bad Check ..... 10.00

## Expenses to Conferences of Southern Dental

Deans in Biloxi, Miss. for Drs. J. H.

Guion and Wade H. Breeland..... 215.96

## Expenses to Meetings of American Association

of Dental Examiners &amp; Congress on Dental

Education &amp; Licensure in Chicago, Ill. for

Dr. J. H. Guion..... 116.84

## Expenses to Meeting of American Association

of Dental Examiners in Los Angeles, Calif.

for Drs. J. H. Guion &amp; Wade H. Breeland..... 769.82

Total Cash Disbursements..... 10,895.50

CASH ON HAND AND IN BANK DECEMBER 31, 1960.....\$ 9,353.91

Action by House of Delegates: Received for information, May 14, 1961.





NORTH CAROLINA DENTAL SOCIETY OFFICERS 1961-1962. Left to right: S. Byron Towler, Raleigh, Secretary-Treasurer; Norman F. Ross, Durham, President; Edgor D. Baker, Raleigh, President-Elect; Dennis S. Cook, Lenior, Vice President.

# Directory

NORTH CAROLINA DENTAL SOCIETY  
OFFICERS AND COMMITTEES  
1961-1962  
N. C. DENTAL ASSISTANTS' ASSOCIATION OFFICERS 1961-1962  
N. C. DENTAL AUXILIARY OFFICERS 1961-1962  
N. C. DENTAL HYGIENISTS' ASSOCIATION OFFICERS 1961-1962  
LIST OF PAST PRESIDENTS

## NORTH CAROLINA DENTAL SOCIETY 1961-1962

### OFFICERS

President: Norman F. Ross, Box 3806, Duke Medical Center.....Durham  
President-Elect: Edgar D. Baker, 817 Professional Building.....Raleigh  
Vice President: Dennis S. Cook, 210 Norwood Street.....Lenoir  
Secretary-Treasurer: S. Byron Towler, 801 Professional Bldg.....Raleigh  
Editor-Publisher: Clinton C. Diercks, P. O. Box 270.....Morganton  
Speaker of the House: Ralph D. Coffey, P. O. Box 270.....Morganton  
Executive Secretary: Andrew M. Cunningham, P. O. Box 11065.....Raleigh

### EXECUTIVE COMMITTEE

Chairman: Pearce Roberts, Jr. (1964), 410 Doctors' Bldg.....Asheville  
Darden J. Eure (1963), 707 Bridgers Street.....Morehead City  
Riley E. Spoon, Jr. (1962), Professional Building.....Winston-Salem  
Luther H. Butler (1962), 430 West Gaston Street.....Greensboro

### NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

President: G. Shuford Abernethy (1963), 407 Second Street, N.W.....Hickory  
Secretary-Treasurer: J. Homer Guion (1964) 602 Doctor's Building,  
1012 Kings Dr.....Charlotte 7  
R. B. Barden (1964), 1002 Murchison Building.....Wilmington  
S. L. Bobbitt (1963), 719 Professional Building.....Raleigh  
Wade H. Breeland (1962), Breeland Building.....Belmont  
S. W. Shaffer (1962), 421 Southeastern Building.....Greensboro

### DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

FRANK O. ALFORD (1964)	WILBERT JACKSON (1963)
RALPH D. COFFEY (1962)	ERBIE M. MEDLIN (1964)
R. FRED HUNT (1963)	C. C. POINDEXTER (1962)

### ALTERNATE DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

EDGAR D. BAKER	PEARCE ROBERTS, JR.
DENNIS S. COOK	NORMAN F. ROSS
CLINTON C. DIERCKS	S. BYRON TOWLER

### NOTE

In accordance with a change in policy, the Roster of Members usually included in this issue will be published in January 1962 and every January thereafter.

## STANDING COMMITTEES

**Advisory Committee for Veterans' Administration Program:** Guy R. Willis (1965), Chairman; L. D. Herring (1963), Robert Long (Mocksville) (1962), Coyte R. Minges (1964), H. E. Plaster (1966).

**Clinic Committee:** Horace P. Reeves, Jr., Chairman; James H. Lee, Henry O. Lineberger, Jr., Barry G. Miller, Gene L. Reese, Ledyard E. Ross, C. H. Sugg.

**Constitution and Bylaws Committee:** Z. L. Edwards (1966), Chairman; D. T. Carr (1964), Ralph L. Falls (1963), T. G. Nisbet (1965), Marcus R. Smith (1962).

**Council on Dental Health and Information:** E. A. Pearson, Jr. (1963), Chairman; W. L. Hand, Jr. (1966), Harry A. Karesh (1962), L. B. Peeler (1964), William D. Yelton (1965).

**Ethics Committee:** G. L. Hooper (1962), Chairman; A. C. Current, Jr. (1964), W. K. Griffin (1963), T. G. Nisbet (1965), Horace K. Thompson (1966).

**Exhibit Committee:** W. Penn Marshall, Chairman; Robert H. Gilbert, John W. Girard, Jr., D. F. Hord, Jr., W. Harrell Johnson.

**Insurance Committee:** E. L. Eatman (1962), Chairman; T. L. Blair (1964), John S. Dilday (1966), Charles D. Gerdes (1965), W. W. Rankin (1963).

**Legislative Committee:** H. Royster Chamblee (1965), Chairman; E. U. Austin (1963), Paul E. Jones (1966), S. Everett Moser (1962), S. W. Shaffer (1964).

**Library and History Committee:** Neal Sheffield (1963), Chairman; Frank O. Alford (1964), H. Royster Chamblee (1962), M. M. Lilley (1966), S. H. Steelman (1965).

**Membership Committee:** E. D. Baker, Chairman; M. M. Forbes, James E. Graham, Jr., W. L. Hand, Jr., L. D. Herring, C. W. Poindexter.

**Necrology Committee:** J. Ernest Roberts (1966), Chairman; Dewey Boseman (1964), Boyce A. Brawley (1963), Marcus R. Smith (1965), W. D. Yelton (1962).

**Program Committee:** Baxter B. Sapp, Jr., Chairman; R. B. Barden, Cecil A. Pless, Jr., Horace P. Reeves, Jr., D. W. Seifert, Jr., J. Harry Spillman, Guy R. Willis.

**Prosthetic Dental Service Committee:** C. P. Osborne, Jr. (1963), Chairman; C. Z. Candler, Jr. (1964), Joe V. Davis, Jr. (1962), Thomas L. Dixon (1966), C. D. Eatman (1965).

**Publicity Committee:** W. Stewart Peery (1966), Chairman; Walter H. Davis (1965), Z. L. Edwards, Jr. (1963), C. W. Sanders (1962), T. E. Sikes, Jr. (1964).

**Relief Committee:** J. T. Lasley (1963), Chairman; S. L. Bobbitt (1965), W. E. Clark (1966), J. W. Heinz (1964), R. Fred Hunt (1962).

**State Institutions Committee:** S. H. Isenhower (1966), Chairman; E. D. Baker (1963), M. L. Cherry (1965), D. A. Jackson (1964), M. M. Lilley (1962).

## SPECIAL COMMITTEES

**Advisory Committee to the North Carolina Dental Assistants' Association:** C. W. Poindexter, Chairman; W. A. Current, W. W. Ellis, Guy E. Pigford, L. H. Short, C. H. Sugg, Frank H. Walker.

**Advisory Committee to the North Carolina Dental Hygienists' Association:** A. Dwight Price, Chairman; A. J. Galarde, Cecil R. Lupton, J. Wayne Martin.

**Advisory Committee on Dental Care for the Aged:** Riley E. Spoon, Jr., Chairman; F. D. Bell, J. S. D. Nelson.

**Blue Shield—Blue Cross Advisory Committee:** F. D. Bell (1964) Chairman; Vaiden B. Kendrick (1962), S. Everett Moser (1963).

**Cancer Committee:** Grover C. Hunter, Jr., Chairman; Glenn Bitler, John H. Dixon, Z. L. Edwards, Jr., F. Glenn Gaither.

**Children's Dental Health Committee:** Duncan M. Getsinger, Chairman; James A. Crawford, John W. Girard, Jr., James H. Lee, Marion L. Ralls, Paul A. Stroup, Jr.

**Convention Committee:** E. C. Schiebel, Chairman; and the Chairmen of the following Committees: **Program**, B. B. Sapp, Jr.; **Exhibit**, W. Penn Marshall; **Publicity**, W. Stewart Peery; **Hospitality**, R. W. Sugg; **Housing**, R. S. Hunter; **Clinic**, Horace P. Reeves, Jr.; **Necrology**, J. Ernest Roberts; **Dental Hygienists**, A. Dwight Price; **Dental Assistants**, C. W. Poindexter; **Golf**, R. Bruce Warlick; **Monitor**, R. A. Daniel, Jr. and Robert H. Gainey; **Skeet Shoot**, H. W. Moore; **Visual Education and Scientific Exhibits**, Cecil A. Pless, Jr.; **Entertainment**, D. Clyde Young, Jr.

**Dental Advisory Committee to the University of North Carolina:** D. T. Carr, Chairman; R. B. Barden, S. L. Bobbitt, Wade H. Breeland, A. P. Cline, Charles S. Cooke, George L. Edwards, Jr., W. K. Griffin, C. C. Poindexter, C. W. Sanders, Riley E. Spoon, Jr., Robert W. Sugg.

**Dental Formulary Committee:** Charles M. Westrick, Chairman; A. J. Franklin, O. J. Freund, Duncan M. Getsinger, W. J. Helsabeck, J. Sidney Hood, E. B. Hopkins.

**Entertainment Committee:** D. Clyde Young, Jr., Chairman; T. G. Collins, Henry C. Harrelson, Jr., Kenneth H. Meadows, D. W. Seifert, Jr., Marvin E. Walker.

**Golf Committee:** R. Bruce Warlick, Chairman; John E. Fraser, A. Dwight Johnson, C. R. VanderVoort.

**Hospital Dental Service Committee:** P. B. Whittington, Jr., Chairman; E. U. Austin, Hylton K. Crotts, William P. Hinson, Jr., James H. Love, Arthur C. Riddle, Jr.

**Hospitality Committee:** Robert W. Sugg, Chairman; C. T. Byerly, Jr., D. T. Carr, C. F. Clark, Jr., Paul M. Cummings, Jr., W. K. Griffin, A. Dwight Price, Robert H. Sager, C. L. Sockwell.

**Housing Committee:** R. S. Hunter, Chairman; John M. Archer, III, James E. Furr, J. J. Lauten, Kenneth M. Ray.

**Medicare Committee:** Henry O. Lineberger, Jr., Chairman; Francis A. Buchanan, Guy V. Harris, C. J. Demary, James E. Moser, W. W. Umphlett.

**Monitor Committee:** R. A. Daniel, Jr., Chairman, Robert H. Gainey, Vice Chairman; Worth M. Byrd, C. T. Byerly, Jr., Charles S. Cooke, Richard J. Citrini, Robert L. Daniel, Z. L. Edwards, Jr., T. S. Fleming, Charles P. Godwin, Richard F. Hunt, Jr., M. M. Lilley, W. E. Neal, James A. Ward, J. R. Wheless, Raymond C. Whitehurst, Jr., W. K. Young.

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1856.....	*W. F. Bason	1916-17.....	*R. O. Apple
1857.....	*E. H. Andrews	1917-18.....	*R. M. Squires
1858.....	*B. F. Arrington	1918-19.....	*J. N. Johnson
1866.....	*B. F. Arrington	1919-20.....	W. T. Martin
1875-76.....	*B. F. Arrington	1920-21.....	*J. H. Judd
1876-77.....	*V. E. Turner	1921-22.....	*W. M. Robey
1877-78.....	*J. W. Hunter	1922-23.....	*S. R. Horton
1878-79.....	*E. L. Hunter	1923-24.....	*R. M. Morrow
1879-80.....	*D. E. Everitt	1924-25.....	J. A. McClung
1880-81.....	*Isaiah Simpson	1925-26.....	*H. O. Lineberger
1881-82.....	*M. A. Bland	1926-27.....	B. F. Hall
1882-83.....	*J. R. Griffith	1927-28.....	*E. B. Howle
1883-84.....	*W. H. Hoffman	1928-29.....	I. R. Self
1884-85.....	*J. H. Durham	1929-30.....	*J. H. Wheeler
1885-86.....	*J. E. Matthews	1930-31.....	Paul E. Jones
1886-87.....	*B. H. Douglas	1931-32.....	*Dennis Keel
1887-88.....	*T. M. Hunter	1932-33.....	Wilbert Jackson
1888-89.....	*V. E. Turner	1933-34.....	*Ernest A. Branch
1889-90.....	*S. P. Hilliard	1934-35.....	*L. M. Edwards
1890-91.....	*H. C. Herring	1935-36.....	Z. L. Edwards
1891-92.....	*C. L. Alexander	1936-37.....	*D. L. Pridgen
1892-93.....	*F. S. Harris	1937-38.....	J. F. Reece
1893-94.....	*C. A. Rominger	1938-39.....	G. Fred Hale
1894-95.....	*H. D. Harper	1939-40.....	F. O. Alford
1895-96.....	*R. H. Jones	1940-41.....	*C. M. Parks
1896-97.....	*J. E. Wyche	1941-42.....	C. C. Poindexter
1897-98.....	*H. V. Horton	1942-43.....	*Paul Fitzgerald
1898-99.....	*C. W. Banner	1943-44.....	Clyde E. Minges
1899-1900.....	*A. C. Liverman	1944-45.....	O. C. Barker
1900-01.....	*E. J. Tucker	1946-47.....	E. M. Medlin
1901-02.....	*J. S. Spurgeon	1947-48.....	R. M. Olive
1902-03.....	*J. H. Benton	1948-49.....	C. W. Sanders
1903-04.....	*J. M. Fleming	1949-50.....	Walter T. McFall
1904-05.....	*W. B. Ramsey	1950-51.....	A. S. Bumgardner
1905-06.....	*J. S. Betts	1951-52.....	R. Fred Hunt
1906-07.....	*J. R. Osborne	1952-53.....	*A. C. Current
1907-08.....	*D. L. James	1953-54.....	Neal Sheffield
1908-09.....	*F. L. Hunt	1954-55.....	*B. N. Walker
1909-10.....	*J. C. Watkins	1955-56.....	*J. W. Branham
1910-11.....	*A. H. Fleming	1956-57.....	H. K. Thompson
1911-12.....	*P. E. Horton	1957-58.....	R. D. Coffey
1912-13.....	*R. G. Sherrill	1958-59.....	S. E. Moser
1913-14.....	*C. F. Smithson	1959-60.....	W. B. Sherrod
1914-15.....	*J. A. Sinclair	1960-61.....	L. H. Butler
1915-16.....	*I. H. Davis	1961-62.....	N. F. Ross

\*Deceased





